



YMIS REFEREE'S PAPERS Form C

YMIS Training Department, SU QLD
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Phone: (07) 3632 2231 Fax: (07) 3632 2299
Email: ymis@suqld.org.au Website: www.suqld.org.au/training

APPLICANT DETAILS

Family Name: _____ Given Name(s): _____
Phone: Home _____ Work _____
Mobile: _____ Email: _____
Postal Address: _____ Postcode: _____

REFEREE DETAILS

Family Name: _____ Given Name(s): _____
Phone: Home _____ Work _____
Mobile: _____ Email: _____
Postal Address: _____ Postcode: _____
Relationship to the applicant: _____

Please comment briefly, but incisively, in the light of the information you have about the applicant's suitability for involvement in the Certificate of Youth Ministry. This information will remain confidential. When completed, please post directly to address above.

1. Background (family, education, work experiences, health):

2. Emotional stability and perseverance (perseverance in problem solving and facing issues realistically):

3. What kind of support mechanism would this person have if he/she joined YMIS (prayer, financial, pastoral)?

4. What observation of the applicant has led to the referee's opinion?

5a.

Qualities (please rate)	Very good	Average	Poor	Don't know
Active involvement in church/community activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intelligence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect for leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership qualities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to listen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organisational ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Honesty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interpersonal relationships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public speaking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5b. Outline any other abilities and talents (e.g. music, counseling etc);

6. Suitability for ministry to youth:

7. Spirituality:

8. In what sort of voluntary youth placement would the referee see the applicant as being most suited (church youth ministry, camps, RE, etc.)?

9. General character comment:

Signed: _____ Date: _____

***Many thanks for your time and effort in completing this reference.
The applicants interview cannot take place until we have received this form.***