



Application Process

Thank you for your interest in VCOM's **children in crisis** school! We are excited to get to know you! Please read the following information so that you know what steps you need to take to complete the application process.

What is entailed in the application process?

After we receive your application, recent photo, \$50 processing fee, and two referrals, our application selection committee will review your application. We will then call you to set up a phone interview time that is convenient for you and our staff. You will be notified via phone or mail of your acceptance or denial within 2-3 weeks of the finalizing date of your application and phone interview.

How do you hold your place in the school?

Following acceptance, you should submit a \$500 non-refundable deposit no later than two months prior to the start of the school. This deposit will guarantee your place in the school and can be made up to one year in advance. Since we keep school size small, and there may be a waiting list, get this in as soon as possible because it is the deposit that holds your place, not the acceptance letter.

What is the fee schedule?

\$50 Application Fee	due with the application
\$500 Deposit	due two months prior to the start of school
Tuition Balance	due the first day of class
Outreach Fees	half due two months prior to the outreach date balance due five weeks prior to the outreach

What if you apply and then change your mind about coming?

We understand that there are several opportunities you to pray about and consider. If you change your mind before school starts, we just ask that you inform our office. The application fee and deposit are not refundable.

Vaccination history

After being accepted to our program, you must provide proof of Hepatitis A and B series of vaccinations, and a record of all childhood immunizations and recent boosters. You may need additional immunizations prior to outreach.

What are the graduation requirements? In order to receive a graduation certificate you must successfully complete all 10 classes. To be eligible to go on outreach, you must successfully complete Level 1 and 2 Classes.

What classes you are applying for?: (cost includes books)

<input type="checkbox"/> Full-time (all classes)		\$2000
<input type="checkbox"/> Part-Time:		
<u>Level 1 Classes</u> (prerequisites or concurrent) (required for outreach)		
<input type="checkbox"/> Biblical Justice	Tuesdays 6pm-7:20	\$ 265
<input type="checkbox"/> Healing Life's Hurts	Saturdays 11:40-1:00pm	\$ 240
<u>Level 2 (Core Classes)</u> (required for outreach)		
<input type="checkbox"/> Topical Issues	Saturdays 10am-11:20	\$ 260
<input type="checkbox"/> Healing the Children of Trauma	Wednesdays 7:40pm-9pm	\$ 195
<input type="checkbox"/> Celebrate Recovery Kids	Fridays 6pm-9pm	\$ 220
<u>Level 3 (Electives)</u>		
<input type="checkbox"/> Literacy	Wednesdays 6pm-7:20pm	\$ 175
<input type="checkbox"/> Child Sexual Exploitation	Mondays 7:40pm-9pm	\$ 215
<input type="checkbox"/> Street Children	Mondays 6pm-7:20pm	\$ 195
<input type="checkbox"/> Children & HIV/AIDS	Thursdays 6pm-7:20pm	\$ 215
<input type="checkbox"/> Children's Health Issues	Thursdays 7:40-9pm	\$ 220
Total Tuition Due (includes books)		\$ _____
Total Outreach Due		\$3500



Personal Information

Full Legal Name _____ What people call you _____
Present Address _____ City _____ State _____ Zip _____
Permanent Address _____ City _____ State _____ Zip _____
Home Phone _____ Cell Phone _____
Email Address _____ Skype ID _____
Date of Birth ____/____/____ Current Age _____ Gender Male Female
Are you a citizen of the United States? Yes No If No, Country of Citizenship _____
Marital Status Single Engaged Married Separated Divorced Widowed
Do you have children Yes No
Spouse's name _____

Family Background

Name of Father or Guardian _____ Occupation _____
Present Address _____ City _____ State _____ Zip _____
Permanent Address _____ City _____ State _____ Zip _____
Home Phone _____ Email Address _____
Name of Mother or Guardian _____ Occupation _____
Present Address _____ City _____ State _____ Zip _____
Permanent Address _____ City _____ State _____ Zip _____
Home Phone _____ Email Address _____



Education Background

Secondary/High school or equivalent attended _____

Location _____ Did you graduate? Yes No If so, what year _____

College attended _____ Degree's Earned _____

Trade School attended _____ Degree's Earned _____

Discipleship School attended _____

What are your fields of interest in education and training? _____

Church Background

Name of Home Church _____ Denomination _____

Address _____ City _____ State _____ Zip _____

Church Phone _____ Email Address _____

Name of Sr. Pastor _____ Name of Youth Pastor _____

Describe your involvement in this church (how long attended, ministries involved with, etc)

Financial Status

How do you plan to pay for your tuition? _____

Will you have the total amount by the required dates? Yes No If No, please explain _____



Financial Status (cont)

Will you have your own vehicle available for local transportation during the school term? Yes No

If No, are you prepared to financially assist another student with gas and upkeep of their vehicle in order to carpool? Yes No

Do you have health insurance? Yes No If Yes, who is your provider? _____

List any debts, loans, or payments that you will have during the school: _____

Release Form

Release of Liability

I/we do hereby release Vineyard College of Mission, its staff, agents and volunteer assistants from any liability whatsoever arising out of any injury, damage or loss which may be sustained by said person(s) during the course of involvement with the Vineyard College of Mission.

Signature _____ Date _____

Consent of Treatment

In case of emergency, I/we hereby agree to the performance of such treatment, including anesthesia and surgery, that the attending doctor or physician may deem necessary.

Signature _____ Date _____

- Checklist for application to be processed**
- Four page application
 - \$50 application fee
 - Recent picture
 - Pastor or spiritual director reference form
 - Teacher, employer or friend reference form
 - Copy of your Passport

children in crisis



Spiritual Background

On a separate piece of paper, please describe your relationship with God. In this history, please include the major decisions you have made in your spiritual walk. Please keep your response to no more than two pages.

Creativity Background

What musical instruments do you play? _____

What languages do you speak? _____

What hobbies do you have? _____

What habits do you have? _____

What simple thing brings you great joy? _____

Do you like to be stretched? Explain _____

What job would you give anything to have? _____

What else should we know about you? _____

Why do you want to be part of **children in crisis**? _____



Personal Assessment

Please give us an assessment of how you see your strengths and weaknesses in the following areas.

Mental Ability	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Personal motivation	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Maturity	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Appearance	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Spiritual growth observed	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Self-image	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Emotional stability	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Coping with personal problems	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Response to pressure	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Reliability/faithfulness	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Financial responsibility	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Honesty	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Openness	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Moral standards	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Positives attitude	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Grateful spirit	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Enthusiasm	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Judgment/common sense	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Creativity	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Adaptability/flexibility	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Teamwork/cooperation	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Servanthood	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Follows instructions	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Teachable spirit	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Liked by others	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Concern for others	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Can express feelings	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Communication skills	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Ability to motivate and lead others	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Ability to plan/set goals	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Self-discipline	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Lives from your heart	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit



Teacher, Employer or Friend Recommendation Form

To be filled out by high school or college teacher, employer or friend, and **mailed directly to Vineyard College of Mission**. A family member should not fill out this form.

Applicant's Name _____ Application's Phone _____
 Present Address _____ City _____ State _____ Zip _____

INSTRUCTIONS: Each applicant for admission to the Vineyard College of Mission must submit recommendations. Serious consideration will be given to your comments; therefore we ask that you complete the form carefully and return it directly to our office. Your comments will be held in confidence.

Mental Ability	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Personal motivation	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Maturity	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Appearance	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Spiritual growth observed	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Self-image	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Emotional stability	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Coping with personal problems	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Response to pressure	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Reliability/faithfulness	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Financial responsibility	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Honesty	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Openness	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Moral standards	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Positives attitude	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Grateful spirit	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Enthusiasm	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Judgment/common sense	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Creativity	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Adaptability/flexibility	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Teamwork/cooperation	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Servanthood	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Follows instructions	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Teachable spirit	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Liked by others	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Concern for others	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Can express feelings	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Communication skills	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Ability to motivate and lead others	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Ability to plan/set goals	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Self-discipline	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Lives from their heart	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit



Teacher, Employer or Friend Recommendation Form pg 2

What are this applicant's best attributes? _____

In your opinion, what areas would this applicant benefit the most by growing in? _____

Does this applicant have any persistent habits that you feel would restrict him/her from fitting into a fairly intensive program? Yes No If yes, please explain _____

Would you recommend this applicant to **children in crisis**? Yes No Hesitant
Why? _____

How long have you known the applicant? _____

Would you consider your relationship to the applicant to be very close fairly close
 an acquaintance minimal?

What is your relationship to the applicant? High School Teacher College Teacher Employer Friend

Why do you think the applicant asked you to fill out this form? _____

Any additional comments can be made on a separate sheet.

Referrer's Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email Address _____

Signature _____ Date _____

If you have any questions, please call the **children in crisis** staff at 208.377.1477

Please send this form directly to the VCOM office

children in crisis
Vineyard College of Mission
4950 N. Bradley
Boise, ID 83714



Pastoral Recommendation Form

To be filled out by a church pastor, youth group leader or small group leader and **mailed directly to Vineyard College of Mission**. A family member should not fill out this form.

Applicant's Name _____ Application's Phone _____
 Present Address _____ City _____ State _____ Zip _____

INSTRUCTIONS: Each applicant for admission to the Vineyard College of Mission must submit recommendations. Serious consideration will be given to your comments; therefore we ask that you complete the form carefully and return it directly to our office. Your comments will be held in confidence.

Mental Ability	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Personal motivation	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Maturity	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Appearance	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Spiritual growth observed	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Self-image	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Emotional stability	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Coping with personal problems	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Response to pressure	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Reliability/faithfulness	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Financial responsibility	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Honesty	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Openness	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Moral standards	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Positives attitude	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Grateful spirit	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
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Judgment/common sense	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Creativity	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Adaptability/flexibility	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Teamwork/cooperation	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Servanthood	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Follows instructions	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Teachable spirit	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Liked by others	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Concern for others	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Can express feelings	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Communication skills	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Ability to motivate and lead others	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Ability to plan/set goals	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Self-discipline	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit
Lives from your heart	<input type="checkbox"/>	Excellent!	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Okay	<input type="checkbox"/>	Lacking	<input type="checkbox"/>	Major Deficit



Pastoral Recommendation Form

What are this applicant's best attributes? _____

In your opinion, what areas would this applicant benefit the most by growing in? _____

Does this applicant have any persistent habits that you feel would restrict him/her from fitting into a fairly intensive program? Yes No If yes, please explain _____

Would you recommend this applicant to **children in crisis**? Yes No Hesitant
Why? _____

How long have you known the applicant? _____

Would you consider your relationship to the applicant to be very close fairly close
 an acquaintance minimal?

What is your relationship to the applicant? Pastor Youth Leader Small Group Leader

Any additional comments can be made on a separate sheet.

Referrer's Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email Address _____

Signature _____ Date _____

If you have any questions, please call the **children in crisis** staff at 208.377.1477

Please send this form directly to the VCOM office

children in crisis
Vineyard College of Mission
4950 N. Bradley
Boise, ID 83714