



RHEMA Bible Training College

PERSONAL EVALUATION

19 Tolmer Place, Springwood, Queensland 4127, Australia/ PO Box 1648, Springwood, 4127



Full-time ☐ Part-time

Name of Applicant

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Surname	Christian Name	Middle Name	Address	Phone	Email
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APPLICANT: PLEASE READ BEFORE DISTRIBUTING THIS FORM.

I understand that this confidential statement will be submitted to RHEMA with the understanding that its contents will not be shared with me. I hereby waive my right to see the confidential statement submitted on this form.

Applicant's Signature

Date

EVALUATOR:

For admission to RHEMA, each applicant must submit two evaluations to complete their application. Serious consideration will be given to your comments. Please complete this form carefully and in privacy. Since we request a candid evaluation, we will hold your comments in strictest confidence. Therefore, we ask that this completed form be mailed directly to RBTC Office of Admission.

Please return this form in an envelope marked *Confidential* to:
RHEMA Bible Training College - Office of Admission
PO Box 1648
Springwood, Queensland 4127, Australia

- I have known the applicant as a: ☐ Minister ☐ Friend ☐ Relative ☐ Church Member ☐ Other
- How long have you known the applicant? _____ year(s) _____ month(s)
- Has your relationship been:
☐ Intense ☐ Very Close ☐ Close ☐ Casual
☐ Intermittent ☐ Distant ☐ Other _____
- Please check the area of his/her involvement in the church:
☐ Usher ☐ Music ☐ Teacher ☐ Children/Youth
☐ Sound ☐ Prayer Room ☐ Other _____
- How do you see studying at RHEMA benefiting their involvement if accepted?
- Please evaluate his/her personal character. Please add additional comments on the back of this form with any area that you have ticked Fair or Poor.**

Areas of Evaluation	Excellent	Good	Fair	Poor	Unknown
In Christian life & testimony					
In commitment to church					
In conduct & moral attitude					
In accepting responsibility					
In meeting financial obligations					
In academic ability					
In ability to lead others					
In personal appearance					
In family relationships					
In health (social, mental, physical)					
Social interaction with others					

- Are there any grave criminal, moral, social or mental health issues that we need to be aware of? ☐ Yes ☐ No If "Yes", please add additional comments on back of this form.
- Would you recommend the applicant for acceptance to RBTC? ☐ Yes ☐ No If "No", please add additional comments on back of this form.

Name		Signature			Date
Home Phone ()	Work Phone ()	Mobile ()	Email		

