

4th September 20XX

Your Church Name
123 Church Street
Church City, ST 12345
Church (123) 456-7890
church_email@example.com

RE: First Last Name of Applicant

School of Ministry Registration and Admissions:

[Please tell us a little about yourself and the role you have in association with the applicant.]

[Please give an outline of the applicant's character and reasons for your endorsement of him/her.]

[Please give examples of leadership roles displayed by the applicant and of potential you see.
Please also define areas of particular growth you would like to see in this candidate]

[Please offer what support you, your church, and your congregants can and will give the applicant;
eg: Monetary scholarship, donations, project support, training, opportunity, etc.]

Sincerely,

Pastor's Signature

Your Name

Your Personal Number

Your Personal Email