

**Church Endorsement Form**

Dear Pastor:

Applicants for admission to Midwestern Baptist Theological Seminary are required to provide evidence of current commitment and active membership in a local Christian church. We ask the applicant's church to affirm this by completing this candidate endorsement. *Part I* should be completed by an appropriate official (other than the applicant) or committee of the church. *Part II* of the endorsement should be read to the congregation or administrative board and approved by the congregation or board (per the local church's own constitution). Once completed, please return the document to the Office of Admissions at the address below.

We take your endorsement of the applicant very seriously. Thank you for your assistance in this matter.

Midwestern Baptist Theological Seminary  
 Admissions Office  
 5001 N. Oak Trafficway  
 Kansas City, MO 64118-4697

**Part I - Biographical Information**

Applicant's Name \_\_\_\_\_

Is applicant a current member of your church?             Yes             No

If no, please explain.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date applicant became a member of your congregation (month and year) \_\_\_\_\_

Applicant became a member of your congregation by (check one):

- Profession of faith
- Letter from a Southern Baptist Church
- Letter from a non-Southern Baptist Church
- Other (please specify) \_\_\_\_\_

Does applicant reflect activity equal to that of the committed laity in your church?

In worship service attendance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
In financial stewardship?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
In program involvement? (Bible study, missions, music, etc.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

List positions of leadership, volunteer or paid, which applicant has held in your church:

Position	Approximate Length of Service

# MIDWESTERN BAPTIST THEOLOGICAL SEMINARY

\_\_\_\_\_  
Applicant's last name

Additional Comments:


## Part II – Statement of Endorsement

The following statement must be approved through the standards preset by your church's constitution. Approval options include a vote of the congregation, a vote by the church elders or deacon board, or completion by a member of the pastoral staff.

Having evidence that the applicant is an individual who:

- is committed to the Christian faith;
- evidences a divine call to ministry;
- has moral integrity;
- is emotionally stable and able to fill leadership responsibilities in church life;
- shows potential for responsible Christian ministry

We recommend the applicant for admission to Midwestern Baptist College and pledge our continuing interest and prayerful support.

Name of Church	Denomination of Church
Mailing Address	Moderator's Signature
City, State, Zip Code	Church Clerk's Signature
Church Phone Number	Date of Approval

**MIDWESTERN BAPTIST THEOLOGICAL SEMINARY**

Applicant's last name \_\_\_\_\_

**Pastor Recommendation Form**

**NOTE TO APPLICANT:** Complete this section before giving it to your Pastor. If you have less than one-year of relationship with your Pastor, or if you are related to him, then a deacon or Sunday School teacher or former pastor may complete this form. If you are a Pastor, you may give it to your Director of Missions.

Submit the form to your pastor with a stamped envelope addressed to:

Midwestern Baptist Theological Seminary  
Admissions Office  
5001 North Oak Trafficway  
Kansas City, MO 64118-4697

Applicant's Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Telephone \_\_\_\_\_ Work Telephone \_\_\_\_\_

<input type="checkbox"/> I waive <input type="checkbox"/> I do not waive	...all future rights to review the contents of this recommendation form.
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Applicant's Signature \_\_\_\_\_

**Recommendation**

The person named above is applying for admission to Midwestern Baptist Theological Seminary. Please evaluate the applicant, thinking specifically of the applicant's commitment to ministry as evidenced by participation or leadership in the local church. Evaluate the person's intellectual and personal traits, character, integrity, and fitness for ministry. Return the form in the envelope provided by the applicant to Midwestern Baptist Theological Seminary.

Recommender's Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Job Title \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

What is your relationship to the applicant? \_\_\_\_\_

Describe the applicant's involvement in the local church or ministry: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# MIDWESTERN BAPTIST THEOLOGICAL SEMINARY

\_\_\_\_\_  
Applicant's last name

Please evaluate the applicant.

	Poor	Below Average	Average	Above Average	Out-standing	No Observation
Christian commitment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential for effective ministry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to empathize with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doctrinal integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Persistence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sound judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marital Health (If Applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you know anything about the mental or emotional health of the applicant which might hinder effective Christian ministry?

- Yes
- No

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

Do you know of any personal habits which might hinder effective Christian ministry?

- Yes
- No

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

Do you recommend this person for admission and as a candidate for ministry?

<p><b>Yes</b></p> <p style="text-align: center;"> <input type="checkbox"/> with enthusiasm                  <input type="checkbox"/> with confidence                  <input type="checkbox"/> with reservations                  <input type="checkbox"/> with reluctance         </p>	<p><b>No</b></p> <p><input type="checkbox"/></p>
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Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Recommender \_\_\_\_\_ Date \_\_\_\_\_

MIDWESTERN BAPTIST THEOLOGICAL SEMINARY

Applicant's last name \_\_\_\_\_

**Recommendation Form**

**APPLICANT:** Complete this section before giving it to your recommender. The recommender should **not** be a relative and should be someone you have known for at least one year. Submit the form the recommender with a stamped envelope addressed to:

Midwestern Baptist Theological Seminary  
Admissions Office  
5001 North Oak Trafficway  
Kansas City, MO 64118-4697

Applicant's Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Telephone \_\_\_\_\_ Work Telephone \_\_\_\_\_

<input type="checkbox"/> I waive <input type="checkbox"/> I do not waive	...all future rights to review the contents of this recommendation form.
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Applicant's Signature \_\_\_\_\_

**Recommendation**

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Recommender's Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Job Title \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

What is your relationship to the applicant? \_\_\_\_\_

Describe the applicant's involvement in the local church or ministry: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# MIDWESTERN BAPTIST THEOLOGICAL SEMINARY

Applicant's last name \_\_\_\_\_

Please evaluate the applicant.

	Poor	Below Average	Average	Above Average	Out-standing	No Observation
Christian commitment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential for effective ministry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to empathize with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doctrinal integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Persistence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sound judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marital Health (If Applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you know anything about the mental or emotional health of the applicant which might hinder effective Christian ministry?

- Yes
- No

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

Do you know of any personal habits which might hinder effective Christian ministry?

- Yes
- No

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

Do you recommend this person for admission and as a candidate for ministry?

<p><b>Yes</b></p> <p style="text-align: center;"> <input type="checkbox"/> with enthusiasm                  <input type="checkbox"/> with confidence                  <input type="checkbox"/> with reservations                  <input type="checkbox"/> with reluctance         </p>	<p><b>No</b></p> <p><input type="checkbox"/></p>
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Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Recommender \_\_\_\_\_ Date \_\_\_\_\_

MIDWESTERN BAPTIST THEOLOGICAL SEMINARY

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# MIDWESTERN BAPTIST THEOLOGICAL SEMINARY

Applicant's last name \_\_\_\_\_

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 \_\_\_\_\_

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Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature of Recommender \_\_\_\_\_ Date \_\_\_\_\_