

## Commission Ministers Network Peer Recommendation for Ministerial Ordination

This form is to be filled out by a ministerial peer  
who is then to mail it directly to CMN at  
CMN • 4401 S. Staples Street • Corpus Christi, TX 78411 • U.S.A.

Person seeking CMN ordination \_\_\_\_\_

**Dear Fellow Minister:**

**The person named above has completed required studies and is seeking ministerial ordination through Commission Ministers Network. As their ministerial peer, your input is very valuable in helping us determine if they have the spiritual calling and qualifications for ordination in their specific area of ministry. Your honest and candid evaluation is needed and greatly appreciated.**

**Once you have completed this recommendation form, please mail it directly to us at the above address. Do not give it back to the applicant. All responses will be kept strictly confidential.**

**Thank you,**

**The Credentialing Board of CMN**

1. Do you recommend this person for ministerial ordination?

Yes	Not at this time*
Yes, with reservations	No**

\*If you checked "Not at this time", we will not ordain the person but will recommend they apply again later.

\*\*If you checked "No", we will not ordain this person and you do not have to complete the rest of this form. Thank you for your help. Please mail this directly to us at the above address.

2. Is this person already serving in some form of ministry?

Yes	No	I do not know
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3. How long have they been involved in this and other ministry?

More than 5 years	1-3 years
3-5 years	Less than 1 year

4. How long have you known this person?

More than 5 years	1-3 years
3-5 years	Less than 1 year

5. How well do you know this person?

Very well	Not very well
Fairly well	Only a little

6. How familiar are you with this person's ministry?

Very familiar	Not very familiar
Fairly familiar	I have no knowledge about their ministry

7. What kind of ministry does this person do? Check all that apply.

- Preaching, Teaching
- Music
- Evangelism
- Caring for needy and poor
- Helping, Serving or Administration
- Pastoral Ministry

Other \_\_\_\_\_

8. How much time do they give to this ministry?

- Full Time
- 5-6 days a week
- 3-4 days a week
- 1-2 days a week
- Less than 1 day a week

\_\_\_\_\_

9. Is this a person of high moral character with a good reputation in the community?

- Yes
- No
- I do not know

10. Please rate the applicant on the following characteristics and make any comments below:

	Excellent	Good	Fair	Poor	Unknown
<b>Above reproach</b>					
<b>Integrity</b>					
<b>Disciplined</b>					
<b>Upholds sound doctrine</b>					
<b>Compassion</b>					
<b>Emotional Stability</b>					
<b>Initiative</b>					
<b>Social Ability</b>					
<b>Leadership</b>					

Comments \_\_\_\_\_  
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11. Person giving this reference

My name \_\_\_\_\_

Mailing Address \_\_\_\_\_  
 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Postal Code \_\_\_\_\_

Country \_\_\_\_\_