

Elijah House Training for Prayer Ministry
STUDENT CHARACTER REFERENCE
CONFIDENTIAL – For School Facilitator use only

CONFIDENTIAL: This form is confidential and for the Elijah House Video School Facilitator only.

[Student Applicant] _____ is applying to attend an Elijah House Facilitated Video School for Prayer Ministry at (facility name) _____. We would appreciate your candid assessment of this individual's character qualities and spiritual gifting. Your comments are important. Please return this character reference directly to the student in a sealed envelope.

1. What is your relationship with the applicant? Length of relationship _____(yrs)

2. How would you evaluate the applicant in the following areas?
 (Circle number: 5 = strongest and 1 = weakest)

	HIGH	4	MEDIUM	3	LOW	2	DON'T KNOW	1	
Humility	5	4	3	2	1				<input type="checkbox"/>
Mournful over sin	5	4	3	2	1				<input type="checkbox"/>
Gentle; meek	5	4	3	2	1				<input type="checkbox"/>
Seeks to do things God's way	5	4	3	2	1				<input type="checkbox"/>
Merciful	5	4	3	2	1				<input type="checkbox"/>
Pure in heart	5	4	3	2	1				<input type="checkbox"/>
Peacemaker	5	4	3	2	1				<input type="checkbox"/>
Self-controlled	5	4	3	2	1				<input type="checkbox"/>
Heart for the lost	5	4	3	2	1				<input type="checkbox"/>
Cares for others	5	4	3	2	1				<input type="checkbox"/>
Integrity	5	4	3	2	1				<input type="checkbox"/>
Overall Spiritual Maturity	5	4	3	2	1				<input type="checkbox"/>

3. What areas in the applicant's life do you feel need development?

4. What areas in the applicant's life do you see as strengths?

Signature: _____ Date: _____

Print Name: _____ Relationship to Applicant: _____

Phone: _____ City, ST _____

(Please return to applicant in a sealed envelope.)

FEDERAL BUREAU OF INVESTIGATION
 DEPARTMENT OF JUSTICE
 FORM NO. 101 (REV. 1-25-60)

This report contains information which is being furnished to you for your information only. It is not intended to be used for any other purpose. The information contained herein is confidential and its disclosure to unauthorized persons is prohibited.

This report is prepared for the use of the recipient and should not be distributed outside the recipient's organization.

DATE	TIME	LOCATION	BY	FOR	REMARKS
10/15/60	10:00	Room 1000	J. Edgar Hoover	Mr. Tolson	Meeting with Mr. Tolson
10/15/60	11:00	Room 1000	J. Edgar Hoover	Mr. DeLoach	Meeting with Mr. DeLoach
10/15/60	12:00	Room 1000	J. Edgar Hoover	Mr. Mohr	Meeting with Mr. Mohr
10/15/60	1:00	Room 1000	J. Edgar Hoover	Mr. Casper	Meeting with Mr. Casper
10/15/60	2:00	Room 1000	J. Edgar Hoover	Mr. Callahan	Meeting with Mr. Callahan
10/15/60	3:00	Room 1000	J. Edgar Hoover	Mr. Conrad	Meeting with Mr. Conrad
10/15/60	4:00	Room 1000	J. Edgar Hoover	Mr. Felt	Meeting with Mr. Felt
10/15/60	5:00	Room 1000	J. Edgar Hoover	Mr. Gale	Meeting with Mr. Gale
10/15/60	6:00	Room 1000	J. Edgar Hoover	Mr. Rosen	Meeting with Mr. Rosen
10/15/60	7:00	Room 1000	J. Edgar Hoover	Mr. Sullivan	Meeting with Mr. Sullivan
10/15/60	8:00	Room 1000	J. Edgar Hoover	Mr. Tavel	Meeting with Mr. Tavel
10/15/60	9:00	Room 1000	J. Edgar Hoover	Mr. Trotter	Meeting with Mr. Trotter
10/15/60	10:00	Room 1000	J. Edgar Hoover	Mr. Tele. Room	Meeting with Tele. Room
10/15/60	11:00	Room 1000	J. Edgar Hoover	Miss Holmes	Meeting with Miss Holmes
10/15/60	12:00	Room 1000	J. Edgar Hoover	Miss Gandy	Meeting with Miss Gandy

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