

**NCYM Program Ministries Department  
SOUL Staff 2010 Reference Form**

Dear Friend,

\_\_\_\_\_ has applied to serve on the SOUL Ministry Staff for North Carolina Yearly Meeting. We appreciate your willingness to take the time to fill out this reference form. Please be clear and honest in your answers. Thank You!

1. What three qualities best describe this person?

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2. Are there any weaknesses that may affect this person's ability to make a positive contribution to this ministry?

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3. Rate the applicant in the following areas with 5 being the highest score & 1 being the lowest score.

Spiritual Maturity	5	4	3	2	1
Dependability	5	4	3	2	1
Works well with others	5	4	3	2	1
Leadership Ability	5	4	3	2	1
Self Starter	5	4	3	2	1
Positive Attitude towards Supervision	5	4	3	2	1
Emotional Stability	5	4	3	2	1
Concern for others	5	4	3	2	1
Patience	5	4	3	2	1

*Form continued on back*

4. Please check any of the following areas in which the applicant has shown talent or gifts.

<input type="checkbox"/> Sports/Athletics	<input type="checkbox"/> Crafts	<input type="checkbox"/> Teaching	<input type="checkbox"/> Drama
<input type="checkbox"/> Public Speaking	<input type="checkbox"/> Construction	<input type="checkbox"/> Music	<input type="checkbox"/> Prayer
<input type="checkbox"/> Planning/Organizing	<input type="checkbox"/> Speaking Spanish	<input type="checkbox"/> Leading Bible Study	
<input type="checkbox"/> Other (please explain)			
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5. Do you have any additional comments you would like to make?

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

Name \_\_\_\_\_ Date \_\_\_\_\_

Phone \_\_\_\_\_

Please mail the completed form to:  
NCYM  
Program Ministries Department  
4811 Hilltop Road  
Greensboro, NC 27407