

EVALUATION

To the applicant: Please complete the information directly below and have either a teacher or spiritual leader fill out the information in the gray section. Please provide a stamped envelope addressed to Arts With A Mission, P.O. Box 3000, Garden Valley, TX 75771 for the person filling out the reference. This is a confidential evaluation therefore it will not be shown to you.

Name of applicant _____ Phone () _____

Address _____
City State Zip

Applying for Arts With A Mission Camp, June 10 –17, 2007

To the person filling out this form: The above applicant has applied for participation at a Youth With A Mission (YWAM) Tyler program. YWAM, founded in 1960, is an international, interdenominational Christian missionary organization. Serious consideration will be given to your comments, so we would greatly appreciate your careful and thoughtful completion of this form. All evaluations will be kept in strict confidence, and will not be shown to the applicant. Your early response (within 7 days) would be most appreciated. Thank you for your assistance.

What is your relationship to the applicant? _____

How well do you know the applicant? _____

Please assign one of the following to each area listed: Superior (S), Above Average (AA), Average (A), Below Average (BA), Inferior (I)

Ability to receive correction _____	Leadership _____
Self-confidence _____	Willingness to serve _____
Social poise _____	Emotional stability _____
Concern for others _____	Communication skills _____
Ability to follow _____	Health _____

Which of the following would best describe the applicant's Christian experience?

- Mature Contagious Genuine and Growing Superficial

Please comment on the applicant's family background. _____

What do you consider to be the applicant's strong points? _____

What could this summer camp do to aid in the applicant's personal development? _____

Would you recommend the applicant for acceptance into the Performing Arts Camp?

- Yes Yes, with reservations (explain) _____
 No (explain) _____

Feel free to make additional comments on back of this page.

Signature _____ Date _____

Name (please print) _____ Phone () _____

Address _____
City State Zip

