

This page is to be filled out a member of the applicant's church leadership, and sent (by email or snailmail) to SWBC by June 10th, 2019.

DLT c/o SWBC
8005 Kathryn Ave. SE
Albuq., NM 87108

swbcamp@gmail.com

If you have any questions regarding this page of the Discipleship and Leadership Training application, feel free to contact Southwest Bible Camp.

Name of Church Leader: _____

1) Name of applicant: _____

2) Name of assembly/local church applicant attends: _____

3) For how many years have you known the applicant? _____

4) How often does the applicant participate in the meetings of the local fellowship?

Most meetings ____ About once a month ____ Infrequently ____ Other (explain): _____

5) In what areas of service is the applicant involved? _____

6) Based on conversations you have had with the applicant and the actions you have observed, please share with us your thoughts regarding the applicant's desire to grow in Christ, the applicant's attitude toward authority figures in the applicant's life, and the applicant's attitude toward work.

7) Based on conversations you have had with the applicant and the actions you have observed, how would you rate the applicant's desire to learn more about the Word of God?

____ No desire ____ Weak ____ Fair ____ Strong

8) Do you have any other any other observations, suggestions, or comments? _____

9) I understand that DLT Week is for young people who desire to follow Christ, and who have a desire to receive training and to grow in their walk with Christ. With that understanding, I

____ heartily recommend

____ recommend, but with the following comments: _____

____ do not recommend the applicant for the Discipleship & Leadership Training Program.

Signature of church leader: _____ Signature Date _____

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