

## REFERENCE

If you have any questions about Lifeway College or any of our courses, please contact the College Registrar at [registrar@lifeway.ac.nz](mailto:registrar@lifeway.ac.nz) or by phone on +64-9-425 4054 ext 710 during New Zealand work hours.

1	Applicant's Name						
2	Referees Name						
3	How long have you known the applicant?						
4	Please complete the following table and tick the columns that best represent your opinion of the applicant's behaviour and attitude:						
			Excellent	Good	Average	Poor	Very poor
A	Financial integrity						
B	Choice of friends						
C	Respect for people						
D	Attitude toward the opposite sex						
E	Respect for leadership						
F	Honesty						
G	Reliability						
H	Initiative						
I	Teach-ability / Adaptability						
J	Persistence						
K	Willingness to serve						
L	Emotional stability						
M	Ability to communicate						
5	Please comment on the applicants team work, co-operation skills and leadership potential.						
6	Would you recommend the applicant for training at Lifeway College?						
7	Please give any additional comments on the applicant's character that you have observed.						
<b>REFEREE'S DETAILS</b>							
8	Full Name						
	Address						
	Phone [WK]	Phone [HM]	Email [Best form of communication]				
	Signature		Date		□□	□□	20□□