



# The Brinson Institute of Kingdom Leadership & Development

## CHURCH ENDORSEMENT FORM

### TO BE COMPLETED BY THE APPLICANT

**Important:** Please complete this portion of the form and send it to your recommender. Each of your letters of recommendation should be written by a different person. The recommendation should be **returned to you** in a sealed envelope, signed by your recommender across the flap. Do not open the envelope when it is returned to you. Include the recommendation with the materials you submit with your application.

Name: Last  First  Middle/Maiden

Social Security Number

List below, or briefly describe in an attached paragraph, your activity in local congregations, fellowships, or para-church organizations. Address any long periods of non-membership or inactivity in your personal testimony.

<u>Name and Location of Church or Religious Body</u>	<u>Activities</u>	<u>Years of Involvement</u>	
		From:	To:
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**TO THE APPLICANT:** The Family Education Rights and Privacy Act of 1974, also known as the Buckley Amendment, gives students a right to inspect and review their educational records. This includes the right to read specific confidential statements and letters of recommendation. In order to protect the confidentiality of your recommendation, you may waive this right. Please indicate your decision to waive or not to waive this right by checking the appropriate statement and signing your name on the line below.

1. I waive my right to examine this recommendation.
2. I do not waive my right to examine this recommendation.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**TO BE COMPLETED BY THE RECOMMENDER**

**TO THE RECOMMENDER:** The person named above is applying for admission to Hope Bible Institute and Seminary, Hammond, IN. The Admission Committee would appreciate your candid and detailed assessment of the applicant’s qualifications, academic abilities (specifically relating to research, writing and integrative skills) and potential. Please return the requested materials to the applicant in a sealed envelope with your signature across the flap prior.

If the applicant has waived his or her right, this letter will be held confidential. If the applicant has not waived his or her right, it will be assumed that this letter may be seen by the applicant if the applicant enrolls in Hope Bible Institute.

Please check the appropriate recommending body:

\_\_\_\_\_ Congregational Action

\_\_\_\_\_ Board Action

Please use the space below or attach a separate sheet of paper to provide your candid and detailed assessment of the applicant’s qualifications, ministry involvement, academic abilities and potential.

Please return this form, along with your detailed assessment, to the applicant in a sealed envelope with your signature across the flap.

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Church/Board Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_