

Date of recommendation : \_\_\_\_\_

Name : \_\_\_\_\_

Email : \_\_\_\_\_

Phone : \_\_\_\_\_

The individual that requested this recommendation letter is applying for SUMMER MISSION TRIP.

Please fill out this form confidentially and email it to [indonesia.summermission.org](mailto:indonesia.summermission.org) or mail it directly to **IFGF Surabaya** | Ruko Satelit Town Square A1, Jalan Raya Sukomanunggal 5, Surabaya 60189, East Java, Indonesia.

Name of the applicant : \_\_\_\_\_

Your relationship with the applicant : \_\_\_\_\_

How long have you known the applicant? : \_\_\_\_\_ years and/or \_\_\_\_\_ months

1. What area do you think this applicant needs to improve in his/her spiritual walk?
  
  
  
  
  
  
  
  
  
  
2. Please list 3-5 things that you would consider as the applicant's greatest strength!
  
  
  
  
  
  
  
  
  
  
3. Please list 3-5 things that you would consider as the applicant's greatest weakness!
  
  
  
  
  
  
  
  
  
  
4. Please mark the applicant's level of responsibility (from **1 – WORST** to **10 – BEST**):
  - a. Respect Authority \_\_\_\_\_
  - b. Problem-solving \_\_\_\_\_
  - c. Servanthood \_\_\_\_\_
  - d. Complaining \_\_\_\_\_
  - e. Team-work \_\_\_\_\_
  - f. Honesty \_\_\_\_\_
  - g. Temper \_\_\_\_\_

5. Would you recommend this applicant to go on mission trip? **YES** / **NO**