

TO THE APPLICANT: Each applicant to Kenneth Copeland Bible College is required to submit two Personal Recommendations for review. Please complete this top section and then give this form to the person (teacher, employer, friend or mentor) you choose to have complete it. **They must have known you for at least 6 months and cannot be a relative.**

Applicant's Name _____ Date _____
 Phone (____) _____ Email _____
 Current Address _____
 City _____ State _____ Zip _____

TO THE PERSON COMPLETING THIS RECOMMENDATION FORM: The above-named individual is applying for admission to Kenneth Copeland Bible College of Newark, T . Serious consideration will be given to your comments and remarks. Thank you for your assistance. **You must have known the applicant for at least 6 months and cannot be a relative.** **Once you have completed the form, please send it directly to the KCBC office at:** Kenneth Copeland Bible College, Attn: Admissions, PO Box 475, Newark, T 76071 OR email it to: admissions@kcbiblecollege.org. You are welcome to contact us at 0817-420-8100 if you have any questions.

1. How long have you known the applicant? _____
2. What is your relationship to the applicant? (cannot be a family member)
 ___ High School teacher / counselor ___ College teacher / counselor
 ___ Friend ___ Employer ___ Other _____
3. How well do you know the applicant?
 ___ Name / sight ___ Casually ___ Fairly well ___ Very close
4. To your knowledge, has the applicant made a personal commitment to Jesus Christ?
 ___ Yes ___ No ___ I don't know
5. To your knowledge, what Christian service is the applicant involved in (such as Sunday school teacher, youth leader, nursery worker)? _____

6. Please indicate what you consider to be the applicant's strengths.

7. Please indicate what you consider to be the applicant's weaknesses.

