

BCCTR PERSONAL REFERENCE

Name of Applicant (please print clearly): _____

The above named applicant is applying for credentialing by the Board of Christian Crisis & Trauma Response (BCCTR). The BCCTR is a network of Christian crisis responders who are capable and experienced, with a strong and authentic Christian foundation to their caregiving and/or ministerial service. The purpose of the BCCTR is to help identify Christian crisis responders who provide the highest quality of care to those they serve. As a **Personal Reference**, we are asking you to provide us your assessment of this applicant's qualifications.

Name of Reference: _____

Ministerial Title: _____

Organization/Church (if applicable): _____

Address: _____
(Street) (City) (State) (Zip)

Phone: Work: () _____ Home: () _____ Cell: () _____

Email: _____

How long and in what capacity have you known the applicant? _____ years _____ months

Please rate the applicant on the following characteristics using the descriptions provided below.
 Please check only one box for each characteristic.

	Above		Below		
1. Demonstrates a positive and authentic relationship with Jesus Christ.	<input type="checkbox"/>				
2. Reflects a commitment to ongoing growth in his/her personal and spiritual life.	<input type="checkbox"/>				
3. Actively involved in a local church, congregation, or faith community.	<input type="checkbox"/>				
4. Personal effectiveness in life is congruent with offering care to others.	<input type="checkbox"/>				
5. Willingness to address his/her own mistakes and accept accountability to others.	<input type="checkbox"/>				
6. Has reputation for being of person of ethical integrity, moral character, and spiritual maturity.	<input type="checkbox"/>				
7. Demonstrates the ability to effectively guide and direct others when in a position of leadership.	<input type="checkbox"/>				
8. Has effective relational/"people" skills and is able to set appropriate boundaries.	<input type="checkbox"/>				

I recommend certification by the BCCTR (check one): _____ Highly _____ Moderately _____ With Reservation

Signature: _____ **Date:** _____

If you would like to add any additional comments, feel free write on the back of this page or attach a separate letter. Please put the completed reference form (*and other comments*) in a **sealed envelope** with your **signature across the back flap** and return to the applicant. Thank you for your participation.