



2025 Pastoral Recommendation Form

Please return completed form by June 16th, 2025 to:
Brad Brede Ministries
PO Box 393
Alexandria, MN 56308

A \$25 late fee will be added to each application postmarked after June 16th.
If you have questions regarding this form, please contact us at:
Phone: 320-815-3314
E-mail: youthcamp@xtremeministry.com

Directions to Applicant

Please complete the information in this section and deliver this form to your senior pastor.

Name: _____

Address: _____ City: _____

State: _____ Zip: _____ Phone: (_____) _____ - _____

I understand that this confidential statement will be submitted to Brad Brede Ministries and its contents will not be shared with me. I hereby waive my right to view the confidential statements made on this form.

Signature: _____ Date: ____ / ____ / ____

Directions to Pastor

Each worker that desires to serve at an Xtreme Passion Youth Camp must have a completed Pastoral Recommendation Form on file. Please complete the form and mail directly to the above address. If you are related to the applicant, please have a non-related pastor or lay leader complete this form. Please complete this form truthfully in private. Due to the nature of the questions, we will hold your comments in strict confidence. Serious consideration will be given to your comments.

1. How long have you known the applicant? _____ Year(s) _____ Month(s)

2. What is your relationship to applicant?
 Pastor Assistant Pastor Music/Worship Director Youth/Children’s Pastor Co-Worker
 Fellow Member Other

If you checked other, please explain: _____

3. How would you describe your relationship?
 Intense Very close Close Casual Intermittent Distant Other

If you checked other, please explain: _____

4. Do you believe the applicant has a personal relationship with Jesus Christ? Yes No

5. Please describe the applicant's attitude toward the church and its activities.

6. Please check the area(s) of the applicant's involvement in the church.

Audio/Visual Children Music Prayer Teacher Usher Youth Other

If you checked other, please explain: _____

7. How industrious is the applicant as a worker?

Usually conscientious, hard worker Works harder than most Works as much as most
 Works less than most Very lazy I have no basis for judgement

Comments: _____

8. Please evaluate the applicant's personal character. Place a rating next to each trait:

5 = Excellent 4 = Above average 3 = Average 2 = Below average 1 = Unknown

Honesty _____	Personal cleanliness _____	Response to authority _____
Promptness _____	Moral character _____	Consideration for others _____
Adaptability _____	Self-confidence _____	Ability to handle stress _____
Social poise _____	Cooperativeness _____	Ability to communicate clearly _____
Work ethic _____	Leadership ability _____	Ability to receive correction _____
Moral character _____	Emotional stability _____	Ability to deal with interpersonal conflicts _____
Servant attitude _____	Teachable attitude _____	Acceptance of instruction or discipline _____
Dependability _____	Ability to lead others _____	Ability to make decisions _____

9. Are you aware of any mental or emotional illness or instability in the applicant?

Yes No If you answered Yes, please explain: _____

10. Would you describe the applicant as any of the following (check all that apply):

- Critical Irritable Depressed Argumentative Domineering Rebellious

Comments: _____

11. How would you describe the applicant:

- 1) Very stable 2) Stable 3) Unstable 4) Very unstable

If you checked items 3 or 4, please explain: _____

12. Please describe how the applicant responds to authority. _____

13. How would you describe the applicant's spiritual influence on others?

- Positive Neutral Negative

14. With what sort of companions does the applicant usually associate? _____

15. Please describe the applicant's home life and/or marriage. _____

16. To your knowledge, has the applicant ever engaged in questionable moral conduct?

- Yes No If you answered Yes, please explain: _____

17. To your knowledge, has the applicant ever used any of the following:

- Tobacco products Alcohol Illegal drugs

If you checked any of the above, please explain: _____

18. To your knowledge, has the applicant ever been arrested for any offense other than a minor traffic violation?

- Yes No If you answered Yes, please explain: _____

19. To your knowledge, has the applicant ever been involved in homosexuality or trans-genderism?

Yes No If you answered Yes, please explain: _____

20. To your knowledge, has the applicant ever been involved in the occult?

Yes No If you answered Yes, please explain: _____

21. To your knowledge, has the applicant ever been accused, questioned or investigated for child abuse, child neglect or child molestation?

Yes No If you answered Yes, please explain: _____

22. To your knowledge, has the applicant ever been accused, questioned or investigated for spousal abuse?

Yes No If you answered Yes, please explain: _____

23. What do you consider the applicant's strong points: _____

24. What do you consider the applicant's weak points: _____

25. Please share with us any information you may have about the applicant that would help in our evaluation (e.g. recent experiences, incidents in the applicant's life, general personality appraisal, etc.).

26. Do you have any reason to lack confidence in the applicant's ability to serve at Xtreme Passion Youth Camp?

Yes No If you answered Yes, please explain: _____

27. How much individual attention and/or counseling does the applicant need to maintain a victorious Christian walk?
- 1) Applicant seems to need much individualized attention and counseling
 - 2) Applicant seems to need a moderate amount of individualized attention and counseling
 - 3) Applicant seems to maintain victory by their devotional life and from ministry received in church services

If you checked items 1 or 2, please specify: _____

28. From personal knowledge of this individual, what is your recommendation?
- 1) Highly recommend them
 - 2) Recommend them
 - 3) Recommend them with some reservations
 - 4) Hesitate in recommending them
 - 5) Unable to honestly recommend them

If you checked items 3, 4 or 5, please explain: _____

29. Additional comments: _____

Please print

Your name: _____

Your position: _____ Your age: _____ Birth gender: Male Female

Name of your church: _____

Address: _____

City: _____ State: _____ Zip code: _____

Please check all that apply: I am licensed I am ordained

Please list all organizations that you are licensed or ordained with: _____
