

Must be received by January 31, 2010

**Confidential Reference Form for PASTORS  
Tennessee WMU Scholarship**

This form is to be completed and mailed, in triplicate, by your Pastor. If your church is without a pastor or your relative is the pastor, another church leader who knows you may be substitute. However, ALL substitutions must be pre-approved by Tennessee WMU. To request a substitution approval, contact Christy Dyer at 1.800.558.2090, ext. 7919, or [cdyer@tnbaptist.org](mailto:cdyer@tnbaptist.org).

\_\_\_\_\_ has applied for a scholarship through Tennessee WMU. Please give us your opinion of this student in the following areas and return to TN/WMU. Your reference form completes the student's application. Incomplete applications are not considered.

**RATE the student** on a scale of 5-1 with 1 being lowest and 5 being the highest score. **COMMENT in the space provided.** Use additional sheet if necessary. **BOTH RATINGS AND COMMENTS REQUIRED.**

<b>Leadership</b>  Rate _____	<b>Comments:</b>
<b>Missions Involvement</b>  Rate _____	<b>Comments:</b>
<b>Church Involvement</b>  Rate _____	<b>Comments:</b>
<b>Christian Example/Witness</b>  Rate _____	<b>Comments:</b>

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Title or position \_\_\_\_\_ Church Name \_\_\_\_\_

Is there anything else about this student that will help the committee make a fair evaluation of their worthiness to receive a scholarship from Tennessee WMU? If so, write on back or use separate sheet.

**Place in sealed envelope and return completed form in triplicate to  
TN/WMU, P. O. Box 728, Brentwood TN 37024-0728. Must be received by January 31, 2010**