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APPENDIX D

FACULTY REPORT OF INSTITUTION WHERE CANDIDATE APPLYING FOR THE MINISTRY INTEGRATED LEARNING OBTAINED HIS/HER THEOLOGICAL QUALIFICATION

IMPORTANT NOTICE:

1. THIS DOCUMENT IS CONFIDENTIAL AND MUST NOT BE RETURNED TO THE APPLICANT BUT FORWARDED DIRECTLY TO THE EDUCATION AND TRAINING DIRECTORATE (ATTENTION: MIL) AT THE ABOVE ADDRESS
2. CLOSING DATES WHEREBY RECOMMENDATION MUST BE AT THE EDUCATION AND TRAINING DIRECTORATE OFFICE:

30 SEPTEMBER 2008 FOR STARTING MIL ON 1 JANUARY 2009
27 MARCH 2009 FOR STARTING MIL ON 1 JULY 2009

FULL NAME OF CANDIDATE

DETAILS OF INSTITUTION

NAME OF INSTITUTION			
TOWN/CITY			
NAME OF PRINCIPAL			
NAME OF REGISTRAR			
TEL. NO. REGISTRARS OFFICE		FAX. NO.	
		E-MAIL	
DATE OF STUDY	From:		To:
QUALIFICATION(S) OBTAINED			

1. Please give an honest appraisal of candidate's performance in the following areas (tick the appropriate box):

	Poor	Below average	Average	Good	Exceptional
Loyalty towards institution					
Interaction with other students					
Attitude towards those in positions of authority					
Responsibility towards studies					
Class attendance					
Your impression with regard to the candidate's integrity					

2. Would your general impression of the candidate lead you to recommend him/her to enter the Ministry Integrated Learning, a prerequisite to become an ordained pastor in the AFM? (tick the appropriate box)

NO	WE'RE NOT SURE	YES

Please elaborate on your answer in the previous question:

SIGNATURE OF PRINCIPAL/REGISTRAR

DATE