



# ***Applicant Reference Form***

***Church Pastor/Missions Committee Chair***

Name of Applicant: \_\_\_\_\_

The above person is applying for a staff position with Servant Partners and is submitting a reference form to you as a part of that process. Your thoughtful evaluation will help us to effectively meet the needs of the applicant should he/she be accepted. The results of this form are confidential and will not be made known to the individual being evaluated without your approval.

Under each heading in the first section, please select the phrase that MOST OFTEN characterizes the applicant. Then, respond to the short questions and make any final comments that you wish to include. Please mail or fax this form to the Servant Partners office. If you have any further questions please contact our office at (626) 398-1010.

Blessings and many thanks for your assistance!

First Name	Middle Name	Last Name		
Street Address		City	State	Zip Code
Phone	Fax	E-mail		
Relationship to applicant	How long have you known the applicant (in years & months)?			

### **SPIRITUAL LIFE**

- Highly consistent in spiritual disciplines and obedience; unusual spiritual intimacy.
- Attempts consistency in several spiritual disciplines, growing in fruit of the Spirit.
- Works at spiritual disciplines, exhibits fruit of Spirit and personal holiness.
- Struggles with spiritual disciplines and evidences sporadic spiritual growth.
- No spiritual disciplines, intimacy with God, or life of obedience.
- Not able to evaluate.

### **SUPPORT DEVELOPMENT**

- Would actively and graciously raise financial support, would meet with overwhelmingly positive responses.
- Articulate in making needs known. People respond positively with confidence in his/her ministry.
- Willing to make needs known with mixed results. Can live by faith.
- Reluctant to make needs known or ask for money; not comfortable living on support.
- Refuses to discuss financial needs. Will not do well living on support.
- Not able to evaluate.

**CHARACTER QUALITIES**

- Exhibits unquestionable character in public/private life. Humble, dependable and has keen sense of justice.
- Solid character, evidences patience, faithfulness. Earns a high degree of trust.
- Good judgment and demonstrates a servant attitude in most situations.
- Prone to poor judgment. Struggles with perseverance and has need for attention.
- Undependable, private life contradicts public life. Self-promoting, not easily trusted.
- Not able to evaluate.

**SOCIAL SKILLS**

- Unusually engaging, contagious personality. Commands respect by all.
- Exudes quality in manner and appearance. Socially adept.
- Dresses appropriately and has good social skills.
- Occasionally socially inappropriate in behavior or appearance.
- Socially inept. Poor interpersonal skills, is not well received by others.
- Not able to evaluate.

**PHYSICAL CONDITION**

- Excellent health. Very athletic, rarely ill.
- Very good health. Active, not often ill.
- Average health. Some exercise, ordinary sickness.
- Below average health. Somewhat inactive and/or prone to sickness.
- Weak constitution. Has very specific limitations.

**INTELLECTUAL**

- Brilliant, inquisitive mind, unusually creative, relevant, and pragmatic in the use of knowledge.
- Very intelligent and perpetual learner, embraces change. Good conceptual thinker.
- Desires to learn. Is able to understand and grasp new ideas.
- Slow to process and adapt to change. Struggles with new ideas or the unfamiliar.
- Reluctant to learn. Resistant to new ideas.
- Not able to evaluate.

**THEOLOGY AND ECCLESIOLOGY**

- Exceptional grasp of scripture/evangelical theology. Uses Word with power. Understands/ appreciates Kingdom diversity.
- Handles scripture with skill/evangelical balance. Graciously tolerant of theological diversity.
- Grounded in the Word. Can use it in ministry. Can work with others who hold differing convictions.
- Needs better grasp/depth in Word and how to use it in ministry. Prone to theological partisanship.
- Weak in knowledge and application of the Word. Theologically naive or narrow.
- Not able to evaluate.

**LEADERSHIP SKILLS**

- Strongly goal oriented with high degree of charisma. Easily motivates and empowers others. Highly disciplined lifestyle.
- Well managed life. Knows where he/she is going. Motivates others to follow.
- Delegates well. Makes good use of time. Can lead others to meet common goals.
- Attempts to lead with mixed results. May hesitate to delegate.
- Reluctant to lead. Tends to be unsure about direction in life. Tends to be undisciplined; wastes time.
- Not able to evaluate.

**MENTORING - DISCIPLESHIP SKILLS**

- Committed and highly successful in connecting people deeply with Christ, who then disciple others. Very competent in leading small groups.
- Regularly connects people with Christ and discipled others with good success. Skilled in small group leadership.
- Shares Christ and discipled others with moderate success. Has good small group leadership experience.
- Attempts at evangelism and discipleship are infrequent and/ or ineffective. Little small group experience.
- Has not led someone to Christ or discipled others more deeply into the faith. No small group experience.
- Not able to evaluate.

**ENTREPRENEURSHIP**

- Strong risk taker, very flexible, can live with great ambiguity. Highly sacrificial lifestyle.
- Self-starter, enjoys challenge, is flexible, puts mission objectives over personal security and comfort.
- Willing to risk and make personal sacrifices if needed. Can pull up roots and adapt to change.
- Struggles with ambiguity and is reluctant to risk. Needs roots and security.
- Fears risk, strongly needs security and closure. Can be inflexible.
- Not able to evaluate.

**SINGLENES (if applicant is single)**

- Is very secure and enjoys singleness as a present calling and privilege from God.
- Views singleness as an advantage for ministry and uses its unique freedom.
- Uses singleness well for ministry. Occasionally struggles with desires for marriage.
- Fears singleness. Does not use it to its full advantage for ministry.
- Resents singleness. Fights obsession with wanting to be married.
- Not able to evaluate. Does not apply.

**MARRIAGE AND FAMILY (if applicant is married)**

- Marriage is exemplary, attractive and a platform for ministry.
- Strong marriage effective as a team in ministry. Skillful parents.
- Good marriage is used for ministry. Successful at parenting.
- Occasional tensions in marriage hinder ministry. May struggle with parenting.
- Marriage is weak, needs to receive ministry. Unable to minister to others. Behavioral problems with preteens.
- Not able to evaluate. Does not apply.

**EMOTIONAL MATURITY**

- Deals very well with high levels of stress. Excellent self-image/sense of humor. Exceptional capacity for bearing others' burdens.
- Copes with high level of stress. Good self-image. Effectively bears burdens of others.
- Good emotional balance, knows self well. Can bear some emotional burdens of others.
- Prone to stressing out. Must work to maintain emotional stability. Has little capacity to emotionally support others.
- Emotionally needy. Poor self-image. Incapable of constructive relationships.
- Not able to evaluate.

**TEAM FUNCTIONS**

- Exceptionally teachable, indispensable asset to any team. Allows little unresolved conflict in relationships. Rarely has problems with authority.
- Teachable, good team player, submissive to spiritual authority, works to resolve interpersonal conflicts.
- Follows leadership. Works well on a team. Knows how to resolve conflict.
- Struggles with teachability and authority. Has difficulties resolving conflict.
- Tends to cause conflict on a team, unteachable. Does not respond to authority.
- Not able to evaluate.

**PLEASE RESPOND TO THE FOLLOWING QUESTIONS:**

**1) What specific spiritual gifts, strengths, and weaknesses do you recognize in the applicant? Please give concrete examples of how you have seen him/her use his/her gifts in ministry.**

--

**2) To your knowledge, has the applicant or anyone in their immediate family ever had problems with: 1) involvement in occult, cult, or sect activities; 2) heterosexual sin (pornography, promiscuity, etc.); 3) homosexual sin; 4) alcohol addiction; 5) illicit drug use; 6) eating disorder, or 7) criminal activity? Are there any other specific problems or limitations that you feel we should know about in considering the applicant? If yes to any of the above, please explain the circumstances as thoroughly as possible.**

--

**3) Does your church/group support the applicant's desire to work with Servant Partners? Is the church willing to partner with the applicant in prayer and/or financially? If yes to these, to what extent? If no, please explain.**

--

**YOUR RECOMMENDATION:**

**What is your overall evaluation of the applicant's promise as Servant Partners staff?**

- Excellent prospect
- Good prospect, but I have some reservations (*please explain below*)
- Unsuitd at this time (*please explain below*)
- Unsuitd (*please explain below*)

**How confident are you in your ratings, comments and recommendation?**

- I have worked with and know the applicant exceptionally well.
- I know the applicant well having observed him/her on many occasions.
- I know this person reasonably well.
- I am unsure, having observed him/her on only a few occasions.
- I really do not know this person well at all.

**Final Comments:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please send or fax this form to:

Servant Partners  
 P.O. Box 3144  
 Pomona, CA 91769  
 Telephone: (626) 398-1010  
 Fax: (626) 398-1028

Thank you very much for your prompt response!

[www.servantpartners.org](http://www.servantpartners.org)



# ***Applicant Reference Form***

## ***Current or Former Employer***

Name of Applicant: \_\_\_\_\_

The above person is applying for a staff position with Servant Partners and is submitting a reference form to you as a part of that process. Your thoughtful evaluation will help us to effectively meet the needs of the applicant should he/she be accepted. The results of this form are confidential and will not be made known to the individual being evaluated without your approval.

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Blessings and many thanks for your assistance!

First Name	Middle Name	Last Name		
Street Address		City	State	Zip Code
Phone		Fax	E-mail	
Relationship to applicant		How long have you known the applicant (in years & months)?		

### **SUPPORT DEVELOPMENT**

- Would actively and graciously raise financial support, would meet with overwhelmingly positive responses.
- Articulate in making needs known. People respond positively with confidence in his/her ministry.
- Willing to make needs known with mixed results. Can live by faith.
- Reluctant to make needs known or ask for money; not comfortable living on support.
- Refuses to discuss financial needs. Will not do well living on support.
- Not able to evaluate.

### **CHARACTER QUALITIES**

- Exhibits unquestionable character in public/private life. Humble, dependable and has keen sense of justice.
- Solid character, evidences patience, faithfulness. Earns a high degree of trust.
- Good judgment and demonstrates a servant attitude in most situations.
- Prone to poor judgment. Struggles with perseverance and has need for attention.
- Undependable, private life contradicts public life. Self-promoting, not easily trusted.
- Not able to evaluate.

**SOCIAL SKILLS**

- Unusually engaging, contagious personality. Commands respect by all.
- Exudes quality in manner and appearance. Socially adept.
- Dresses appropriately and has good social skills.
- Occasionally socially inappropriate in behavior or appearance.
- Socially inept. Poor interpersonal skills, not well received by others.
- Not able to evaluate.

**PHYSICAL CONDITION**

- Excellent health. Very athletic, rarely ill.
- Very good health. Active, not often ill.
- Average health. Some exercise, ordinary sickness.
- Below average health. Somewhat inactive and/or prone to sickness.
- Weak constitution. Has very specific limitations.

**INTELLECTUAL**

- Brilliant, inquisitive mind, unusually creative, relevant, and pragmatic in the use of knowledge.
- Very intelligent and perpetual learner, embraces change. Good conceptual thinker.
- Desires to learn. Is able to understand and grasp new ideas.
- Slow to process and adapt to change. Struggles with new ideas or the unfamiliar.
- Reluctant to learn. Resistant to new ideas.
- Not able to evaluate.

**LEADERSHIP SKILLS**

- Strongly goal oriented with high degree of charisma. Easily motivates and empowers others. Highly disciplined lifestyle.
- Well managed life. Knows where he/she is going. Motivates others to follow.
- Delegates well. Makes good use of time. Can lead others to meet common goals.
- Attempts to lead with mixed results. May hesitate to delegate.
- Reluctant to lead. Tends to be unsure about direction in life. Tends to be undisciplined; wastes time.
- Not able to evaluate.

**ENTREPRENEURSHIP**

- Strong risk taker, very flexible, can live with great ambiguity. Highly sacrificial lifestyle.
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- Not able to evaluate.

**EMOTIONAL MATURITY**

- Deals very well with high levels of stress. Excellent self-image/sense of humor. Exceptional capacity for bearing others' burdens.
- Copes with high level of stress. Good self-image. Effectively bears burdens of others.
- Good emotional balance, knows self well. Can bear some emotional burdens of others.
- Prone to stressing out. Must work to maintain emotional stability. Has little capacity to emotionally support others.
- Emotionally needy. Poor self-image. Incapable of constructive relationships.
- Not able to evaluate.

**TEAM FUNCTIONS**

- Exceptionally teachable, indispensable asset to any team. Allows little unresolved conflict in relationships. Rarely has problems with authority.
- Teachable, good team player, submissive to spiritual authority, works to resolve interpersonal conflicts.
- Follows leadership. Works well on a team. Knows how to resolve conflict.
- Struggles with teachability and authority. Has difficulties resolving conflict.
- Tends to cause conflict on a team, unteachable. Does not respond to authority.
- Not able to evaluate.

**PLEASE RESPOND TO THE FOLLOWING QUESTIONS:**

1) What specific strengths and weaknesses do you recognize in the applicant? Please give concrete examples of how you have seen him/her use his/her gifts in the workplace.

2) Are there any other specific problems, limitations, or character flaws that you feel we should know about in considering the applicant? If yes to any of the above, please explain the circumstances as thoroughly as possible.

**YOUR RECOMMENDATION:**

**What is your overall evaluation of the applicant's promise as Servant Partners staff?**

- Excellent prospect
- Good prospect, but I have some reservations (*please explain below*)
- Unsuitable at this time (*please explain below*)
- Unsuitable (*please explain below*)

**How confident are you in your ratings, comments and recommendation?**

- I have worked with and know the applicant exceptionally well.
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**Final Comments:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please mail or fax this form to:

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Pomona, CA 91769  
Telephone: (626) 398-1010  
Fax: (626) 398-1028

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# ***Applicant Reference Form***

## ***Friend***

Name of Applicant: \_\_\_\_\_

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Blessings and many thanks for your assistance!

First Name	Middle Name	Last Name		
Street Address		City	State	Zip Code
Phone	Fax	E-mail		
Relationship to applicant	How long have you known the applicant (in years & months)?			

### **SPIRITUAL LIFE**

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- Attempts consistency in several spiritual disciplines, growing in fruit of the Spirit.
- Works at spiritual disciplines, exhibits fruit of Spirit and personal holiness.
- Struggles with spiritual disciplines and evidences sporadic spiritual growth.
- No spiritual disciplines, intimacy with God, or life of obedience.
- Not able to evaluate.

### **SUPPORT DEVELOPMENT**

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- Not able to evaluate.

**CHARACTER QUALITIES**

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**THEOLOGY AND ECCLESIOLOGY**

- Exceptional grasp of scripture/evangelical theology. Uses Word with power. Understands/ appreciates Kingdom diversity.
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- Grounded in the Word. Can use it in ministry. Can work with others who hold differing convictions.
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- Weak in knowledge and application of the Word. Theologically naive or narrow.
- Not able to evaluate.

**LEADERSHIP SKILLS**

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**MENTORING - DISCIPLESHIP SKILLS**

- Committed and highly successful in connecting people deeply with Christ, who then disciple others. Very competent in leading small groups.
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**ENTREPRENEURSHIP**

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- Fears risk, strongly needs security and closure. Can be inflexible.
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**SINGLENES (if applicant is single)**

- Is very secure and enjoys singleness as a present calling and privilege from God.
- Views singleness as an advantage for ministry and uses its unique freedom.
- Uses singleness well for ministry. Occasionally struggles with desires for marriage.
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- Not able to evaluate. Does not apply.

**MARRIAGE AND FAMILY (if applicant is married)**

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# ***Applicant Reference Form***

## ***School/Ministry Leader or Friend***

Name of Applicant: \_\_\_\_\_

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**CHARACTER QUALITIES**

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- Marriage is exemplary, attractive and a platform for ministry.
- Strong marriage effective as a team in ministry. Skillful parents.
- Good marriage is used for ministry. Successful at parenting.
- Occasional tensions in marriage hinder ministry. May struggle with parenting.
- Marriage is weak, needs to receive ministry. Unable to minister to others. Behavioral problems with preteens.
- Not able to evaluate. Does not apply.

**EMOTIONAL MATURITY**

- Deals very well with high levels of stress. Excellent self-image/sense of humor. Exceptional capacity for bearing others' burdens.
- Copes with high level of stress. Good self-image. Effectively bears burdens of others.
- Good emotional balance, knows self well. Can bear some emotional burdens of others.
- Prone to stressing out. Must work to maintain emotional stability. Has little capacity to emotionally support others.
- Emotionally needy. Poor self-image. Incapable of constructive relationships.
- Not able to evaluate.

**TEAM FUNCTIONS**

- Exceptionally teachable, indispensable asset to any team. Allows little unresolved conflict in relationships. Rarely has problems with authority.
- Teachable, good team player, submissive to spiritual authority, works to resolve interpersonal conflicts.
- Follows leadership. Works well on a team. Knows how to resolve conflict.
- Struggles with teachability and authority. Has difficulties resolving conflict.
- Tends to cause conflict on a team, unteachable. Does not respond to authority.
- Not able to evaluate.

**PLEASE RESPOND TO THE FOLLOWING QUESTIONS:**

1) What specific spiritual gifts, strengths, and weaknesses do you recognize in the applicant? Please give concrete examples of how you have seen him/her use his/her gifts in ministry.

2) To your knowledge, has the applicant or anyone in their immediate family ever had problems with: 1) involvement in occult, cult, or sect activities; 2) heterosexual sin (pornography, promiscuity, etc.); 3) homosexual sin; 4) alcohol addiction; 5) illicit drug use; 6) eating disorder, or 7) criminal activity? Are there any other specific problems or limitations that you feel we should know about in considering the applicant? If yes to any of the above, please explain the circumstances as thoroughly as possible.

3) Does your church/group support the applicant's desire to work with Servant Partners? Is the church willing to partner with the applicant in prayer and/or financially? If yes to these, to what extent? If no, please explain.

**YOUR RECOMMENDATION:**

**What is your overall evaluation of the applicant's promise as Servant Partners staff?**

- Excellent prospect
- Good prospect, but I have some reservations (*please explain below*)
- Unsuitd at this time (*please explain below*)
- Unsuitd (*please explain below*)

**How confident are you in your ratings, comments and recommendation?**

- I have worked with and know the applicant exceptionally well.
- I know the applicant well having observed him/her on many occasions.
- I know this person reasonably well.
- I am unsure, having observed him/her on only a few occasions.
- I really do not know this person well at all.

**Final Comments:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please mail or fax this form to:

Servant Partners  
 P.O. Box 3144  
 Pomona, CA 91769  
 Telephone: (626) 398-1010  
 Fax: (626) 398-1028

Thank you very much for your prompt response!

[www.servantpartners.org](http://www.servantpartners.org)



## Applicant Reference Form

### Physician/Health Care Professional

Name of Applicant: \_\_\_\_\_

#### **Part A: Self-Report (This section is to be filled out by the applicant)**

TO THE APPLICANT: This information is treated confidentially. Please answer all questions in ink or type in English. Arrange to complete **Part B** through your physician and instruct them to mail or fax this form to the Servant Partners office. If you have any further questions please contact our office at (626) 398-1010.

#### PERSONAL HISTORY

1) Do you have or have you ever had any of the following? If yes, check box and comment on next page.

- Skin Conditions
- Jaundice
- Ear Trouble
- Eye Trouble
- High Blood Pressure
- Low Blood Pressure
- Diabetes
- Kidney Disease
- Head Injury
- Gall Bladder Problems
- Anemia
- Recurrent Headache
- Venereal Disease
- Epilepsy
- Asthma
- Hay Fever
- Shortness of Breath
- Fainting Spells
- Heart Trouble
- Tumor/Cancer
- Stomach/Duodenal Ulcer

- Mental or Nervous Disorders
- Hepatitis
- Weakness
- Intestinal Trouble
- Recurrent Diarrhea
- Rheumatism/Arthritis
- Insomnia
- Back Problems
- Dislocation of Joints
- Broken Bones
- Paralysis
- Surgery
- Appendectomy
- Tonsillectomy
- Hernia Repair

#### FEMALES ONLY

- Irregular Periods
- Severe Cramps
- Excessive Flow

Allergy:

- to Penicillin
- to Sulphonamides
- to Serum
- Other Allergies: \_\_\_\_\_  
\_\_\_\_\_
- Food Allergies (specify): \_\_\_\_\_  
\_\_\_\_\_
- Other (specify): \_\_\_\_\_  
\_\_\_\_\_

Are you pregnant?

- Yes
- No

**Comments:**

--

**2) Are you at present under a doctor's care for any reason? If yes, please explain:**

--

**3) Are you taking any medication at this time?**

--

**4) Do you now or have you ever received any compensation for disability from any source?**

--

**5) Have you ever sought treatment for any sort of mental illness?**

--

**6) Have you ever sought treatment for an eating disorder?**

--

**7) Have you ever had any of the following communicable diseases? If yes, please give dates.**

- Chickenpox:
- Scarlet Fever
- Measles (Rubella)
- Tuberculosis
- Mumps
- Pertussis (Whooping Cough)
- Other (specify):

Dates:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FAMILY HISTORY**

**8) Have you or anyone in your family had any of the following? If yes, please describe fully.**

- |   |   |
|---|---|
| <input type="checkbox"/> Tuberculosis   | <input type="checkbox"/> Stomach Disease      |
| <input type="checkbox"/> Diabetes       | <input type="checkbox"/> Asthma               |
| <input type="checkbox"/> Kidney Disease | <input type="checkbox"/> Hay Fever            |
| <input type="checkbox"/> Heart Disease  | <input type="checkbox"/> Epilepsy/Convulsions |
| <input type="checkbox"/> Arthritis      | <input type="checkbox"/> Mental Illness       |

**Comments:**

**Part B: Physician's Evaluation (This section is to be filled out by the physician)**

TO THE PHYSICIAN: Please review the information in Part A. Please indicate all conditions that require treatment and notify us of any problems that you feel merit follow-up by the health services.

<b>First Name</b>		<b>Last Name</b>		
<b>Office Address</b>		<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Phone</b>	<b>Fax</b>	<b>E-mail</b>		
<b>How long have you known the applicant (in years &amp; months)?</b>				

<b>Applicant's Health Information</b>			
<b>Height (inches):</b>		<b>Weight (pounds)</b>	
<b>Overweight?</b>		<b>Underweight?</b>	
<b>Blood Pressure:</b>		<b>Color Perception:</b>	

**Are there any abnormalities of the following systems? If yes, please describe fully.**

- |  |  |
|--|--|
| <input type="checkbox"/> Eyes              | <input type="checkbox"/> Musculoskeletal   |
| <input type="checkbox"/> Teeth             | <input type="checkbox"/> Endocrine         |
| <input type="checkbox"/> Neuro-Psychiatric | <input type="checkbox"/> Lymphatic         |
| <input type="checkbox"/> Cardiovascular    | <input type="checkbox"/> Skin              |
| <input type="checkbox"/> Respiratory       | <input type="checkbox"/> Head              |
| <input type="checkbox"/> Trunk and Back    | <input type="checkbox"/> Ear, Nose, Throat |
| <input type="checkbox"/> Hernia            | <input type="checkbox"/> Pelvic            |

<b>Comments:</b>

**PHYSICIAN'S RECOMMENDATION (Indicate one):**

- Acceptable without limitations
- Acceptable with limitations (specify):
- Acceptable, but should remain in areas where adequate medical care is provided (specify):
- Not acceptable (specify):

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please mail or fax this form to:

Servant Partners  
P.O. Box 3144  
Pomona, CA 91769  
Telephone: (626) 398-1010  
Fax: (626) 398-1028

Thank you very much for your prompt response!

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