

Ignite the Nations International Recommendation form

Personal Recommendation from a pastoral overseer/ministry partner

I understand						•
International Network. I affirm	I know this indivi	dual and have	e observed	d their mi	nistry inv	olvement, spiritual life
and/or demonstration of faith in	n Jesus Christ ar	nd have no re	servations	regardin	ng their a	pplication to the network
Signature:	Printed Name:					
Title:	Date:					
Address:						
City:	Province/State:			ode:		
Telephone:		Country _				
E-Mail:						
Church/Ministry affiliation:						
Website/Social Media addre	esses:					
1. On a scale from one	to ten, how wel	ll would you	say you k	now the	applica	nt?
Not Well 1 2	3 4	5 6	7	8	9	10 Very Well
2. How long have you k	known the appli	cant?				
3. Does the applicant f those they minister			y out thei	r respoi	nsibility	to their ministry and
4. Please provide any c	other details you	u believe are	importan	t for Ign	ite the N	ations

For Further Information:



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International as they consider this application. (Please add sheets as necessary)