



**EZ Ostroff Boys Foundation
Leader/Pastor Recommendation Form**

1. Youth Applicant Information

Youth Name: _____
 Event Name: _____
 Event Dates: _____
 Church/Organization: _____

2. Leader/Pastor Information

Name: _____
 Role/Title: _____
 Church/Organization: _____
 Phone Number: _____
 Email: _____

3. Relationship to the Youth

How long have you known this youth?

Capacity in which you interact (check all that apply):

☐ Youth Group ☐ Church Member ☐ Student Ministries
☐ Missions ☐ Other _____

4. Assessment of the Youth

Area	Excellent	Good	Fair	Poor
Spiritual maturity	☐	☐	☐	☐
Character & integrity	☐	☐	☐	☐
Leadership potential	☐	☐	☐	☐
Willingness to serve	☐	☐	☐	☐
Attitude & behavior	☐	☐	☐	☐
Reliability	☐	☐	☐	☐

5. Written Recommendation

Why should this youth attend this event?

How would this event benefit their spiritual growth?

Does this youth show consistent involvement?

☐ Yes ☐ No

If yes, describe:

Financial hardships?

☐ Yes ☐ No

If yes (optional):

Concerns the Foundation should know?

☐ Yes ☐ No

If yes, explain:

6. Recommendation Strength

☐ Strongly Recommend

☐ Recommend

☐ Recommend with Reservations

☐ Do Not Recommend

7. Signature

I affirm the information is accurate.

Leader/Pastor Signature: _____ Date: _____

FOR FOUNDATION USE ONLY

Reviewed By: _____

Notes: _____