

## Full-time Training in Anaheim Elders and Leading Brothers' Recommendation – Part One

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

Applicant Locality: \_\_\_\_\_

We would encourage you to refer to the **“Guidelines for Reviewing New Applicants for the Full-time Training in Anaheim (FTTA)”** sent to the leading brothers in **June 2016**. Both an electronic and a hard copy was sent.

This form can also be submitted online using a secure [elders and leading brothers' account](#). All applicants from the same locality can be reviewed through this account. It is also acceptable to complete Part One and Part Two and fax or email with the cover sheet included. *Please do not submit handwritten responses.*

Please answer the following questions by checking the appropriate box.

1. Candidate's participation in the church during the past year:

- |  |   |                            |                            |   |
|--|---|----------------------------|----------------------------|---|
| <input type="checkbox"/> 1   | <input type="checkbox"/> 2  | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5                              |
| Has been in/or returned to the church life less than 12 months ago | Has been in the church life more than one year but seldom attends |                            |                            | A strength to the church; imparts life; serves actively |

2. Candidate's knowledge of the truth:

- |  |                            |                            |                            |  |
|--|----------------------------|----------------------------|----------------------------|--|
| <input type="checkbox"/> 1   | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5   |
| Has not read the Bible through; has little understanding of the basic truths |                            |                            |                            | Has displayed a strong knowledge of the Bible and the basic truths |

3. Candidate's ability to work together with others:

- |   |                            |                            |                            |  |
|---|----------------------------|----------------------------|----------------------------|--|
| <input type="checkbox"/> 1  | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5                                     |
| A loner, or one who often argues and fights with others; insists on his/her own way |                            |                            |                            | Works well with others; respects others both older and younger |

4. Candidate's work ethic:

- |                            |                            |                            |                            |   |
|----------------------------|----------------------------|----------------------------|----------------------------|---|
| <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5                  |
| Lacks goals; avoids work   |                            |                            |                            | Very accomplished; responsible, trustworthy |

5. To the best of your knowledge, is the candidate in sound mental health and able to withstand the rigors of the training? If no, please explain in the written recommendation.      Yes       No

6. Is this candidate in the midst of a relationship with someone of the opposite sex? If yes, please explain.      Yes       No

7. Does this candidate understand the restrictions concerning contact with the opposite sex during the training and during the breaks, and that possible dismissal from the training is part of the disciplinary measures that may be exercised if this rule is violated?      Yes       No

8. Does this candidate display any behavior toward those of the same gender that would cause you some concern? If so, please explain.      Yes       No

9. As our training is conducted in English, have you observed the candidate having any difficulties with comprehension, listening, or speaking in English?      Yes       No

10. Concerning the candidate, please check one of the following boxes (if recommended with reservations, explain in written recommendation):

- Highly Recommend       Recommend       Recommend with reservations

*In order to assist us in caring for the prospective trainee, please indicate the name and contact information for the person in your locality who has been most involved with his or her shepherding.*

Main Shepherd of Candidate: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

Shepherd's Email: \_\_\_\_\_ Date: \_\_\_\_\_

**Full-time Training in Anaheim  
Elders and Leading Brothers' Recommendation - Part Two**

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

Applicant Locality: \_\_\_\_\_

Instructions: In the space provided below please summarize the applicant's vision and participation in the service and burden of the church in your locality. This should include the applicant's positive contribution to the church life and service, as well as any problems encountered in his or her living situation or receiving of fellowship. Because many past trainees began the training with very little knowledge of its rules and constraints, there is a need for thorough fellowship and a detailed written recommendation. This information is particularly helpful in considering how best to care for each applicant while in the training.

**Important:** An elders and leading brothers' recommendation will no longer be considered complete unless it is signed by at least two brothers. Please note the brothers' names and contact information at the last section of Part Two to indicate that both brothers agree with the recommendation. A second recommendation can also be submitted, if desired.

*Two elders/leading brothers are required to recommend this applicant:*

Elder/Leading Brother's Name: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

Elder/Leading Brother's Name: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

To help us in our evaluation, is there another leading brother in some other locality that could contribute useful information concerning the suitability of this applicant? If so, please list the name, locality, mobile number, and email address.

Name: \_\_\_\_\_ Locality: \_\_\_\_\_

Mobile Number: \_\_\_\_\_ Email: \_\_\_\_\_

## FTTA Application Cover Sheet

**Instructions:**

Please submit a copy of the Elders and Leading Brothers' Recommendation (Part One and Two) either by fax, by mail, or by email. Please DO NOT send any other sections of the application other than the two pages of the Elders and Leading Brothers' Recommendation.

FTTA Office Fax: 714-991-8537

Email address: office@ftta.org

Mailing address: Living Stream Ministry  
Attn: FTTA Registration  
P.O. Box 2121  
Anaheim, CA  
92814

TO:	FTTA Registration	FAX: 714-991-8537
Sending Locality:		
Prospective Trainee:		VOICE: 714-991-4688
RE:	FTTA Training Application	