

Deacon Formation Program	Diocese of Ogdensburg	Pastor Recommendation Form
<b>Applicant Name</b>		
<b>Pastor/Priest</b>		
<b>Parish</b>		

*Please complete this form. Please use additional paper for other comments that you might wish to make.*

1. How well do you know the applicant?  
 Very Well                       Somewhat                       Not at all
  
2. How many years have you known the applicant? \_\_\_\_\_ years
  
3. How well do you know the applicant's spouse?  
 Very Well                       Somewhat                       Not at all
  
4. Is the applicant faithful to Mass and the sacraments?  
 Yes                                       No
  
5. Does he relate well to others?  
 Yes                                       No
  
6. Is the applicant involved in parish activities (e.g. ministries, committees, etc.)  
 A great deal                       Occasionally                       Seldom  
If yes, please indicate those areas of service:
  
7. How would you describe the candidate's leadership in pastoral ministry?  
 Capable Leader                       Limited                       Not Capable                       I do not know
  
8. Does he work well with others?  
 Yes                       No                       I do not know
  
9. Does he appear to exercise good judgement?  
 Yes                       No                       I do not know
  
10. Does he seem to accept authority well?  
 Yes                       No                       I do not know
  
11. Does he accept change well?  
 Yes                       No  
If no, please explain:
  
12. Does he accept the teachings of the Church?  
 Yes                       No                       I do not know  
If no, please explain:

13. Can you envision the applicant working effectively with ...  
 Pastors and other parish leaders?  
Yes            No            I do not know
- Parishioners (w/ applicant in a leadership position)?  
Yes            No            I do not know
14. If the applicant is married, are you aware of any marriage or home life difficulties?  
Yes            No  
 If yes, please explain:
15. If married, is his wife supportive of her husband's desire to enter the deacon formation program?  
Yes            No            I do not know  
 If no, please explain:
16. Please comment, if you can, on the man's intellectual abilities in regards to the program's academic requirements?
17. Do you believe that the man is drawn to the diaconate for the right reasons:  
Yes            No            I do not know
18. **RECOMMENDATION**
- \_\_\_\_\_I recommend this applicant.  
 \_\_\_\_\_I recommend this applicant with reservations\*\*\*  
 \_\_\_\_\_ I do not recommend this applicant\*\*\*

**\*\*\*Please explain your reasons for this answer:**

\_\_\_\_\_  
 Pastor's Signature

\_\_\_\_\_  
 Date

***Please return this form along with the applicant's inquiry form to:  
 Rev. Msgr. Robert H. Aucoin  
 St. Peter's Church  
 114 Cornelia St.  
 Plattsburgh, NY 12901***