



Reference Form Dance Instructor

Name of Applicant _____

Dates/Tour _____

Applying for outreach with GX International/Impact World Tour (IWT)

I, the above applicant waive any right to have or obtain copies of this recommendation.

Send to: GX International

5402 E. 196th St.

Belton, MO

USA 64012

Phone: 1-816-318-4490

E-mail: GXJam1@aol.com

The above named applicant has applied to one of the GX International/IWT tours. GX Intl. Serves the vision of YWAM Campaigns an evangelistic style ministry associated with Youth With A Mission. It features three night of performances each week in a city, using sports, extreme sports, dance and music to create a platform to give and evangelistic message. In addition they go into many schools to give a positive life message and invite the student and their families to the campaign nights. We are seeing many thousands accept Christ on each tour, mostly teens. This team believes in their generation to follow after the Lord whole hearted and is challenging the youth of today to take a stand for truth and fulfill their destiny in God. In order to adequately evaluate the applicant for outreach, we request the following information. Your honesty would be greatly appreciated in order to meet the

Relationship

How long have you know this person? _____

On a scale of 1-10, how well do you feel you know the applicant (1 being very little; 10 very well) ____

Dance History *Please critique on back under comments section for each dance area*

Which areas of Dance has the applicant pursued under your instruction?

How well does the applicant adapt to new choreography?

Has the applicant ever choreographed for a group or his/herself? ___ Yes ___ No

Character Evaluation *(Explain below questions under comments section on back if necessary)*

Has the applicant at any time proven to be dishonest or of questionable character? ___ Yes ___ No

Is the applicant dependable and trustworthy with responsibility given to him/her? ___ Yes ___ No

Physical Fitness *(circle all that apply)*

active athletic flexible sedentary healthy sickly picky eater good eater anorexic strong weak

Group *(If you answer NO to any of the below questions please explain under comments section on back)*

Does he/she like to work: ___ alone ___ in a group

Has the applicant been an asset to your class? ___ Yes ___ No

Have you enjoyed having the applicant work under you? ___ Yes ___ No

(Continue on the back side)



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