

CHURCH REFERENCE
To be completed by a Pastor

Port Charlotte Christian School
3279 Sherwood Road
Port Charlotte, FL 33980
(941) 625-4450

Thank you for agreeing to be a reference for one of our prospective students. In order to maintain confidentiality, please complete this form and mail it directly to the school at the above address.

NAME OF STUDENT _____ **GRADE** _____

PARENTS _____

This family is seeking admission for their child to Port Charlotte Christian School, a covenant Christian School. We exist to provide a Christian climate for learning. The inherent features of a covenant Christian education require that the families be of good character, with a clear commitment to Jesus Christ as their personal Lord and Savior. It is also essential that the environment and training provided by the school be an extension of and receives complete support from the student's family.

We would appreciate your observations about the parents (F=Father, M=Mother) as listed below. Please use a question mark where you have insufficient knowledge on which to make a judgment. If you wish to discuss this information personally rather than complete this form please check here __, sign the form, and note your telephone number. The Office Administrator will contact you. All information provided is strictly confidential.

I KNOW THE PARENTS

well somewhat

(F=Father) (M=Mother)

COMMITMENT TO CHRIST

- | | |
|--------------------------|--|
| F | M |
| <input type="checkbox"/> | <input type="checkbox"/> exemplary |
| <input type="checkbox"/> | <input type="checkbox"/> clearly evident and beyond question |
| <input type="checkbox"/> | <input type="checkbox"/> minimal evidence |
| <input type="checkbox"/> | <input type="checkbox"/> gives no evidence of commitment |

PARENT CONTROL

- | | |
|--------------------------|---|
| F | M |
| <input type="checkbox"/> | <input type="checkbox"/> firm, constant control |
| <input type="checkbox"/> | <input type="checkbox"/> adequate control |
| <input type="checkbox"/> | <input type="checkbox"/> at times lacking |
| <input type="checkbox"/> | <input type="checkbox"/> lacking |

CHURCH RELATIONSHIP

- | | |
|--------------------------|--|
| F | M |
| <input type="checkbox"/> | <input type="checkbox"/> member in good standing |
| <input type="checkbox"/> | <input type="checkbox"/> not member but supportive |
| <input type="checkbox"/> | <input type="checkbox"/> not supportive |

CHILD'S RESPONSE TO PARENTS

- | | |
|--------------------------|---|
| F | M |
| <input type="checkbox"/> | <input type="checkbox"/> exceptionally obedient |
| <input type="checkbox"/> | <input type="checkbox"/> good obedience evidenced |
| <input type="checkbox"/> | <input type="checkbox"/> acceptable |
| <input type="checkbox"/> | <input type="checkbox"/> poor |

CHURCH ATTENDANCE

- | | |
|--------------------------|---|
| F | M |
| <input type="checkbox"/> | <input type="checkbox"/> faithful and regular |
| <input type="checkbox"/> | <input type="checkbox"/> frequent |
| <input type="checkbox"/> | <input type="checkbox"/> infrequent |
| <input type="checkbox"/> | <input type="checkbox"/> never |

PARENT/CHILD RELATIONSHIP

- | | |
|--------------------------|---|
| F | M |
| <input type="checkbox"/> | <input type="checkbox"/> exceptionally open, warm, loving |
| <input type="checkbox"/> | <input type="checkbox"/> usually open, warm, loving |
| <input type="checkbox"/> | <input type="checkbox"/> frequently strained |
| <input type="checkbox"/> | <input type="checkbox"/> poor |

FAMILY COHESIVENESS

- | | |
|--------------------------|--|
| F | M |
| <input type="checkbox"/> | <input type="checkbox"/> strong, warm, loving ties |
| <input type="checkbox"/> | <input type="checkbox"/> fairly cohesive |
| <input type="checkbox"/> | <input type="checkbox"/> needs strengthening |
| <input type="checkbox"/> | <input type="checkbox"/> very weak |

My recommendation regarding this family is: _____

Signature _____ Position _____

Print Name _____ Date _____

Church _____ Phone # _____

