Church Reference

APPLYING FAMILY

1. Please complete the top portion of this form, supplying the name of your family and your children.
2. Submit this form to your pastor or priest (or other church leader) to your church of regular attendance, asking that the document be completed and returned to Calvin Christian School via mail, fax, or email.
3. For admissions consideration, the completed Admission Application and Church Reference form must be received.

Parent(s)/Guardian(s) Last Name: _____

Father's First Name: _____ Mother's First Name: _____

Child(ren)'s Name(s): _____

CHURCH LEADER

Dear church leader: The family listed above has applied for their child(ren) to be enrolled at Calvin Christian School. For more than 50 years, Calvin Christian School has partnered with Christian families and their churches, teaching the whole child from a biblical worldview. We provide an excellent Christ-centered education that prepares students for a life of Christ-centered service. Because we partner with Christian families and their churches, we ask for feedback from each family's pastor, priest or church leader. This provides us with a more accurate understanding of the level of commitment or involvement this family has to their local church or place of worship. Once you have completed the form to the best of your knowledge and ability, you may return it via mail, fax, or email attachment, using the contact information provided below. Thank you for your prompt attention to this request. We value your insight. It will assist us in determining how we can best serve this family.

ATTENDANCE AT WORSHIP SERVICES

- ☐ Entire family generally attends on a weekly basis. (3-4 times per month)
- ☐ Entire family generally attends on a more occasional basis.
- ☐ Some family members generally attend on a weekly basis. (3-4 times per month)
- ☐ Some family members generally attend on a more occasional basis.

Which family members? ___Father ___Mother ___Children

CHURCH ACTIVITY & INVOLVEMENT

Approximately how long has this family been actively involved in the life of your church? _____

Briefly list how the family is involved in church programs (ex: leadership, home groups, Sunday school, youth groups, etc.).

_____

_____

CHURCH LEADER REFERENCE

How long have you personally known this family? Please also briefly describe the spiritual maturity of this family.

_____

_____

Name of Church: _____ Church Phone: _____

Leader Name (please print) _____ Signature _____ Date _____

Please check one: ___The above information is confidential. ___The above information may be shared with the parents.

Calvin Christian School
2000 North Broadway - Escondido, CA 92026
Phone 760-520-8435 - Fax 760-489-7055
admissions@calvinchristianescondido.org