

# PASTOR'S REFERENCE

(K-5th grade students)



## Grace Christian Academy

(formerly North Rome Christian School)

100 Robert Gabriel Dr., Ulster, PA 18850

(570) 247-2800 Fax no: (570) 247-7288

Email: info@northrome.org

**PARENTS:** please fill out this box only and give to your pastor. Your pastor will complete the rest of the process. Thank You.

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_

Church \_\_\_\_\_ Pastor's Name \_\_\_\_\_

Grace Christian Academy exists to provide Christian families with a place to give their children a quality education in an environment that is distinctly Christian. It will assist each child that is placed in the program to reach his/her God-given potential in academics, Christian character, and physical development, while fulfilling his/her individual and social responsibilities. Its goal is to stand as an educational and spiritual support for Christian and Bible-believing churches and the families that attend.

### Pastor,

**The applicant's parents/guardians are interested in enrolling him/her in Grace Christian Academy. Please answer the following questions as frankly as possible:**

**PART I: please use the following ratings to evaluate this young person and the mail, fax, or email the completed form directly to the GCA office. Feel free to write additional comments in the margins. Your help in this matter is appreciated very much.**

Respectful to parents      Always \_\_\_\_ Usually \_\_\_\_ Sometimes \_\_\_\_ Never \_\_\_\_

Respectful to others      Always \_\_\_\_ Usually \_\_\_\_ Sometimes \_\_\_\_ Never \_\_\_\_

Interested in others

sociable      Always \_\_\_\_ Usually \_\_\_\_ Sometimes \_\_\_\_ Never \_\_\_\_

Cooperative      Always \_\_\_\_ Usually \_\_\_\_ Sometimes \_\_\_\_ Never \_\_\_\_

Accepted by others      Always \_\_\_\_ Usually \_\_\_\_ Sometimes \_\_\_\_ Never \_\_\_\_

Responds well to

correction      Always \_\_\_\_ Usually \_\_\_\_ Sometimes \_\_\_\_ Never \_\_\_\_

Respectful of property      Always \_\_\_\_ Usually \_\_\_\_ Sometimes \_\_\_\_ Never \_\_\_\_

**Continued on back —>**

**PART II: please answer the following questions as frankly as possible:**

1. How well do you know the applicant's parents? \_\_\_\_\_

\_\_\_\_\_

2. Describe the parents' Christian testimony \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. How are the parents involved in the local church?

\_\_\_\_\_

\_\_\_\_\_

4. Are the parents' members of the local church? \_\_\_\_\_

\_\_\_\_\_

5. In your opinion, is the family life of this family consistent with Biblical principles?

\_\_\_\_\_

If not, please explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. In your opinion, are the parents sufficiently grounded in the Word of God to handle the challenges of paying for Christian education and supporting the biblical principles of this Christian school?

\_\_\_\_\_

ADDITIONAL COMMENTS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you recommend the applicant for admission to Grace Christian Academy?

\_\_\_\_\_ Yes \_\_\_\_\_ No

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

**Please personally mail, fax, or email this form to:**

Grace Christian Academy

100 Robert Gabriel Dr.

Ulster, PA 18850

Fax no: (570) 247-7288

Email: [info@northrome.org](mailto:info@northrome.org)