Pastoral Referral

Student's Name: _____ Age: _____

Parent/Guardian: _____

Address: _____

Dear Pastor,

The above-named person has applied for admission to Carolina Christian Academy. Because we are a Christian institution, we try to admit students who have the initiative and character to do their best. We also seek those students who know the Lord Jesus Christ as their personal Savior and desire to accomplish His will.

To aid us in the acceptance process, could you tell us something about the above-mentioned student's character? Please mail or email the completed form directly to our school office as soon as possible so we can complete the application process. Thank you in advance for your input and consideration of time.

Keeping the Faith,

Dr. Christina Black
Administrator

Pastoral Referral Form

Pastor's Name: _____ Phone: _____

Address: _____

Do you feel that the applicant would be desirable as a member of our student body?

_____

_____

Does the applicant show signs of significant spiritual interest? ☐ Yes ☐ No

Please explain: _____

_____

_____

Is there anything about the applicant's character we should be aware of?

_____

_____

_____

_____

To your knowledge, has the applicant ever been suspended from another school?

☐ No ☐ Yes If yes, please explain: _____

_____

Do you know of any illegal activity that the applicant has been involved in?

☐ No ☐ Yes If yes, please explain: _____

_____

Is there any other information-positive or negative-we should know?

_____

_____

_____

_____