



Confidential Student Reference Form

APPLICANT'S NAME _____ **ENROLLMENT GRADE** _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

1. How long have you known the applicant?
2. In what capacity have you known the applicant?
3. To your knowledge has the applicant ever been involved in any immorality, such as drinking, smoking, drugs, swearing, sex...?
4. To the best of your knowledge, has the applicant made a profession of faith in Jesus Christ?
5. Would you recommend this applicant to Grace Academy?
6. Is there anything else you would like to say about this applicant?

To the best of your ability, please evaluate the applicant's Christian character below:

CHRISTIAN CHARACTER	<input type="checkbox"/> EXCELLENT	<input type="checkbox"/> GOOD	<input type="checkbox"/> POOR	<input type="checkbox"/> UNKNOWN
DEPENDABILITY	<input type="checkbox"/> EXCELLENT	<input type="checkbox"/> GOOD	<input type="checkbox"/> POOR	<input type="checkbox"/> UNKNOWN
ABILITY TO GET ALONG WITH OTHERS	<input type="checkbox"/> EXCELLENT	<input type="checkbox"/> GOOD	<input type="checkbox"/> POOR	<input type="checkbox"/> UNKNOWN

Reference given by _____

Phone Number _____

(only if needed for questions)