

Pastoral Reference Form

APPLICANT INFORMATION

First Names of Parents/Guardians _____

Last Name of Parents/Guardians _____

Child's Name _____

PASTOR'S INFORMATION

First Name _____ Last Name _____

Church Name _____ Phone Number _____

E-mail _____ Church Website _____

REFERENCE INFORMATION

How long have you known the Family? _____

How well do you know the Family? ___ Slightly ___ Casually ___ Well ___ Very Well

How long has this family attended your church? _____

How would you describe the applicant's commitment and involvement in church:

- ___ Attends regularly, and is very involved with church activities.
- ___ Attends regularly, but occasionally participates in church activities.
- ___ Irregular in attendance.

Are there any factors that we should be aware of that might hinder their enrollment at Faith Bible Academy?

Would you recommend this applicant to be enrolled at Faith Bible Academy?

- ___ Highly recommend
 - ___ Recommend
 - ___ Recommended, but with reservations
 - ___ Not recommended
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PASTOR'S SIGNATURE

I hereby certify that all information herein is accurate and true to the best of my knowledge.

Signature _____ Date _____

Once completed please return to: Faith Bible Academy, 106 Crosby Rd., Sprakers, NY 12166.
(518) 234-3497.