

## YOUR PASTOR'S RECOMMENDATION

- A. **TO BE FILLED IN BY THE FAMILY:** After you have filled in Part A, please give this form to your Pastor to complete and mail directly to the school.

Family Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Names of Children applying to H.C.A.:

\_\_\_\_\_

\_\_\_\_\_

- 
- B. **TO BE FILLED IN BY THE APPLICANT'S PASTOR:**

Does this family regularly attend church? \_\_\_ Yes \_\_\_ No

Are they members? \_\_\_ Yes \_\_\_ No

Have any members of the family been leaders in the church? \_\_\_ Yes \_\_\_ No

Explain \_\_\_\_\_

Do the children attend: \_\_\_\_\_ Sunday School? \_\_\_\_\_ Youth Group?

Do you recommend the family for admission to Holmesburg Christian Academy?

Yes\_\_\_ No\_\_\_ If you answered No, please explain your reasons on the reverse side of this form. All comments will be kept confidential.

ADDITIONAL COMMENTS \_\_\_\_\_

PASTOR'S NAME \_\_\_\_\_

PASTOR'S SIGNATURE \_\_\_\_\_

CHURCH \_\_\_\_\_

CHURCH ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

- C. **IF YOU ARE UNABLE TO HAVE THIS FORM COMPLETED BY A PASTOR, PLEASE BRIEFLY EXPLAIN WHY.**

\_\_\_\_\_

\_\_\_\_\_