



Student Name: _____ **Grade:** _____

Parent Name: _____

In an effort to maintain high standards of admission for students entering East Gate Christian Academy, we ask that a Pastor/Character reference be filed for each family applying for admission.

Please forward this form to your pastor or someone who can give reference to your family and student's participation in church or religious activities. The involvement of your family in religious activities is of vital importance to the overall view of the Christian education process of East Gate Christian Academy.

Pastor Name: _____

Please provide your written recommendation and reference regarding the family listed above, and in particular, the student who is applying for admission to East Gate Christian Academy. All information that you provide on this form is confidential and will not be shared with anyone other than our school administration for the purpose of making admission decisions.

1. Is this family active in your church?

_____ Regularly _____ Occasionally _____ Seldom _____ Never

2. In your estimation, does this family exhibit a desire to rear their children in accordance with the principles of God's Word?

_____ Yes _____ No _____ Insufficient knowledge to make an evaluation

3. Does the student exhibit an open attitude toward the principles and teachings of the Bible?

_____ Receptive _____ Closed _____ Openly rejects _____ Unknown

4. In your estimation, does this family present a lifestyle that would be a positive testimony for the Lord and East Gate Christian Academy?

_____ Yes _____ No _____ Insufficient knowledge to make an evaluation

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Print Name: _____ Title/Position: _____

Church Address: _____

*East Gate Christian Academy
54 Bedard Street
Fall River, MA 02723*