



CHAPEL HILL
CHRISTIAN ACADEMY

Parent/Pastoral Reference Form

This is a fillable form. Click the box to enter text.

Parent

Please complete parent information and submit this form to a mentor of your child who can speak on behalf of your child's character.

Parent's Name: _____

Applicant's Name: _____

My child is an applicant for admission to Chapel Hill Christian Academy. I hereby authorize you to release to Chapel Hill Christian Academy the following confidential reference form. I waive my right to review the information provided on this form.

Church Name Pastor's Name Telephone

Mailing Address City State Zip Code

Signature of Parent Parent Name (please print) Date

Pastor

Thank you for completing this form in consideration of the above named family. Return this form to Chapel Hill Christian Academy. Please know that this information will remain confidential.

In what capacity have you known the family? _____

For how long? _____

Are the applicant's parents actively involved in your church? Please explain. *(Active means attends church more than twice a month and takes part in church body life.)*

I recommend this family to CHCA:

Enthusiastically

Strongly

Moderately

With Some Reservation

If you checked the With Some Reservation box, please explain _____

Your name (please print) _____ Date _____

Signature Position Denomination