

# CHURCH RECOMMENDATION FORM



A Ministry of Calvary Baptist Church  
 43065 Joy Road  
 Canton, MI 48187

RETURN TO: Admissions@plymouthchristian.org  
 FAX: 734-459-9997  
 PHONE: 734-459-3505x3190

Name of Student: \_\_\_\_\_ Candidate for Grade: \_\_\_\_\_

**Parent or Guardian:** Please write your student's name and grade in the space above. Read and sign the following before giving to your student's pastor or small group leader. (*Advise them to return it to P.C.A. via FAX or email if possible, to [admissions@plymouthchristian.org](mailto:admissions@plymouthchristian.org)*).

I understand and agree that the information contained on this recommendation form is confidential and will be used only in the selection of candidates and will not become part of the candidate's permanent file. I also agree that this completed form will not be available to candidates, parents, or anyone outside of the Admissions Committee, and I hereby waive any right that I may have to see it.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***This student's application is not complete until this form is received in the Admissions Office***

**Pastor/Youth Pastor/Small Group Leader/S.S. Teacher:** Please complete and return this form ***WITHIN ONE WEEK***. As a current pastor or teacher, please evaluate the candidate based on your direct knowledge of him or her. Keep in mind that the applicant should be evaluated according their age. The Admissions Committee thank you for your time and honesty. Please check the appropriate boxes and include comments. **Your comments will be held in strict confidence.**

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## SPIRITUAL DEVELOPMENT

(Please check one)

	Consistently	Usually	Sometimes	Seldom	Not Observed
Demonstrates a personal relationship with God					
Demonstrates an eagerness to learn about God.					
Demonstrates growth in wisdom and Godly virtue					
Attends church and activities					
Participates in class or group discussions					
Parental support is evident					

Has this student accepted Jesus Christ as Lord and Savior? \_\_\_\_\_ Date: \_\_\_\_\_

**Circle the words that best describe this applicant:**

Aggressive	Honest	Immature	Disobedient	Self-disciplined
Oppositional	Mature	Vivacious	Manipulative	Conscientious
Over-protected	Social	Cheerful	Self-centered	Follower
Shy	Confident	Irritable	Easily discouraged	Perfectionist
Helpful	Witty	Responsible	Motivated	Positive leader
Anxious	Articulate	Well-liked	Organized	Negative leader

1. Is the student habitually late or absent? \_\_\_\_ Yes \_\_\_\_ No  
If yes, please elaborate: \_\_\_\_\_

2. If you have additional information that will be helpful to the PCA Admissions Committee in evaluating this candidate's application, please comment. If needed, use another sheet of paper.  
\_\_\_\_\_  
\_\_\_\_\_

3. Is there anything regarding the family that would be helpful for us to know?  
\_\_\_\_\_

4.  ***Please call me for additional information regarding this applicant***

**CHECK ONE:**

\_\_\_\_ Highly recommend \_\_\_\_ Recommend \_\_\_\_ Recommend with reservation \_\_\_\_ Do not recommend

If this answer is "Do not recommend" or "Recommend with reservation", please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Person filling out form: _____
Relationship to Applicant: _____
Name of Church: _____ Phone: _____
Church Address: _____
City, Zip: _____
E-mail Address if further questions: _____
Date: _____