



Pastoral or Ministry Leader Recommendation

I, _____, am applying for admission to Crossroads Christian School. I would appreciate it if you would fill out this form recommending me as a possible student. Please mail or fax to the address listed below. Thank you for your time and assistance.

Leader's Full Name: _____ Organization: _____
Leader's Position: _____ Phone: (____) _____

Please answer the following questions to the best of your knowledge about this child by placing a check in the front of the box that applies.

How long have you known this child?

Less than 1 year 1 to 2 years More than 2 years

How well do you know this child?

Very well Well Somewhat

How would you describe this child's relationship with God?

Serious and Committed Struggles, but loves the Lord
 Average for age Unknown to me Does not know the Lord

How would you describe this child's reliability?

Always Reliable Average Unreliable

How would you describe this child's attitude?

Respectful/Enthusiastic Average Poor

How would you describe this child's work habits?

Hard Worker/Diligent Average Quits Easily/Lazy

How would you describe this child's cooperation with others?

Very Cooperative Average Uncooperative

How would you describe this child's emotional character?

Well Balanced/Mature Average Emotional/Immature

How would you describe this child's submission to authority?

Submissive Average Poor

How would you describe this child's parental support?

Very Involved Average Not Involved

Additional Comments:

Signature

Date