

Section II (TO BE COMPLETED BY THE PASTOR OR CHURCH LEADER)

As applicants, the family named above is required to submit a pastoral reference. Your comments are important to us; therefore, please provide your complete and careful evaluation. You must have known the applicants for at least one year and must not be related.

1. Church Membership of parents: ___ Father ___ Mother ___ Neither parent ___ Both parents

2. Describe the family's attendance church involvement.

4. Are there any concerns about the family or student's character that should be considered as they make application to Anderson Christian School? ___ Yes ___ No ___ I don't know

If yes, please explain:

Recommendation Concerning Acceptance

On the basis of what the family can contribute to the spiritual climate of Anderson Christian School, I

___ Highly Recommend ___ Recommend ___ Recommend with reservations ___ Prefer not to recommend

I need to discuss this recommendation by phone.

Name (please print) _____ Title _____

Church _____ Denomination _____

Phone _____ e-mail address _____

Signature _____

Please fax this recommendation to our office at 864-224-1085

or

Mail to: Admissions 3902 Liberty Highway, Anderson, SC 29621

