Calvary Christian Academy

1771 East Palomar Street
Chula Vista, CA. 91913
Phone (619) 591-2260; Fax (619) 591-2261
www.ccaknights.com admissions@ccaknights.com

Pastoral or Adult Mentor Recommendation

STUDENT INFORMATION					
Student Name			Grade applying for		
PASTOR OR ADULT MENTOR					
Leader's Name Organization					
Leader's Position	Phone				
The student named above is applying for admission to Calvary Christian Academy for the school year. Please answer the following questions about this student to the best of your knowledge by circling the response that most applies. Please email the address listed above at your earliest convenience. Thank you for your time and assistance.					
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?	Se	erious and Committed	Struggl loves th		Average for age
	Unknown to me		Do		es not know the Lord
How would you describe this child's reliability?		Always Reliable	Average		Unreliable
How would you describe this child's attitude?	R	espectful/Enthusiastic	Average		Poor
How would you describe this child's work habits?	Н	lard 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?	V	Vell 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					
Leader's Signature:	Date:	Date:			