



PASTORAL REFERENCE

All students please complete **part 1** of this form.

Please have your pastor, youth pastor, or church elder complete **part 2** (the person completing the reference should not be related to the student).

Please note that the individual you choose should provide as thorough a reference as possible.

Students, make sure to give **part 1** of this form to the person writing your reference.

PART 1: To be completed by the student

Name: _____
Last Name First Name Middle Initial Maiden Name

Address: _____
Street Address City

State/Province Zip/Postal Code Country

Telephone: (____) _____ - _____

Reference: _____
Name Title

Telephone: (____) _____ - _____
(Daytime)

Telephone: (____) _____ - _____
(Evening)

E-Mail: _____

Church Name: _____

Church Telephone: (____) _____ - _____ Fax: (____) _____ - _____

I, _____, give Providence Christian College permission to contact this reference (please print) and waive my right to review any comments made as a result of this reference. Please note that waiving your right to review reference comments is NOT required as a condition of admission.

Student's signature

Date



PASTORAL REFERENCE

PART 2: To be completed by pastor, youth pastor, or church elder

Providence Christian College greatly appreciates your help in the admissions process. Your honest, thoughtful and careful evaluation and recommendation of this student will be most valuable to the Admissions Committee in reviewing this application. Please seal this form in an envelope and sign your name across the flap of the envelope and return to the student. The student will not have a completed application without this reference form. Additional comments may be attached on a separate piece of paper.
www.providencechristiancollege.org

1. How long have you known the student? _____

2. How well do you know the student (what type of interaction have you had with them)?

3. Please comment on the student's Christian commitment and character. _____

4. What are the student's greatest strengths and greatest weaknesses? _____

5. Please list any circumstances Providence Christian College should be aware of before deciding on this student's admission. _____

6. What is your recommendation in respect to this student's admission? _____

Please write the appropriate rating, on a scale of 1-5, for each characteristic listed below. 1 indicates the student does not exhibit that characteristic and 5 indicates that the student excels at the characteristic.

Communications Skills: _____

Integrity: _____

Leadership: _____

Creativity: _____

Responsibility: _____

Self Discipline: _____

Sensitivity to others: _____

Time Management: _____

If you have any questions, please contact our Admissions Department: 909-923-5530 (local), 866-323-0233 (toll free), admin@providencecc.net (e-mail). PO Box 4326, Ontario, CA 91761

Providence Christian College does not discriminate with regard to age, race, color; national origin, sex or disability in any of education its programs or activities.