

9801 Arlington Church Road * Mint Hill, NC 28227 * (704) 545-4589 * www.arlingtonacademy.org

CONFIDENTIAL PASTOR REFERENCE FORM

To the Pastor:

Name of Applicant:			Candidate for Grade:			
To be o	complete	ed by any full-time Pastor on staff:				
1.	On a scale of 1-10 (10 being the highest), how well do you know the family?					
2.	What is your position at the church?					
3.		vould you evaluate the parents in the Their church relationship, attendan	•			
	2.	Their personal relationship to Jesus	Christ.			
	3.	Their interest in having their child k	now and walk with the Lord.			
4.	To you	ur knowledge, has this applicant acce	oted Jesus Christ as Savior?			
5.	How do	lo the parents/guardians support the	r child(ren)'s spiritual development?			

6. What level of involvement are the parents/guardians of the applicant(s) in your church?

7. What are the first words that come to mind to describ	ne this applic	ant?	
7. What are the mot words that come to mind to describ	oc tino appiro	u	
I recommend this student:			
enthusiasticallystronglyfairly strongly _	with res	ervation	
Pastor or Associate Pastor's Signature		· · · · · · · · · · · · · · · · · · ·	
Date			
Position Pho			
Church			
Address	City	State	Zip
I/We hereby authorize release of requested information to co	mplete the a	idmission pro	cess at
ACA. I/We understand this to be part of my student's applica	•	·	
Signatures of Parent/Guardian:			
Date:			

Please return within one week to:

Arlington Christian Academy, 9801 Arlington Church Road, Mint Hill, NC 28227

Revised CAS 11/23/2024