

PASTOR'S RECOMMENDATION

For Applicants in Grades 7 Through 12
Mississippi Valley Christian School

_____ has applied at Mississippi Valley Christian School and needs a Pastor's recommendation in order to be accepted for enrollment. Please complete the following recommendation form to the best of your ability and mail it directly to MVCS at the address below.

Your Name _____ Phone Number _____

Church Name and Address _____

How long have you known the applicant? _____

Briefly describe to what extent you believe you know the applicant and family. _____

What services of your church does this applicant and his family regularly attend?

____ Sunday School ____ Church a.m. ____ Church p.m. ____ Mid-week ____ Others

Do you know anything in the moral or spiritual life of the applicant, past or present, which should enter into this evaluation? If so, please explain. _____

In your opinion, if you had a Christian school, would this applicant be a young person that you would enthusiastically accept into your school? If no, please explain. _____

Is there anything about this applicant which might be termed unusual or peculiar in his or her personality? _____

Please use the scale below to answer the following questions. Circle the number that you think most appropriately describes the applicant. If you do not know the answer to a particular question, leave it blank.

5 – Excellent	4 – Above Average	3 – Average	2 – Below Average	1 – Poor
Attitude and action toward parents	1 2 3 4 5	Desire for spiritual growth	1 2 3 4 5	
Respect for authority	1 2 3 4 5	Separation from worldly things	1 2 3 4 5	
Involvement in the local church	1 2 3 4 5	Leadership ability	1 2 3 4 5	
Ability to cooperate with others	1 2 3 4 5	Relationships with peers	1 2 3 4 5	

Thank you for your assistance.

Please mail directly to: Mississippi Valley Christian School, 2009 Seminary Street, Alton, IL 62002