



Belvoir Christian Academy

Administrator/Teacher Reference

Date: _____

Applicant's Name: _____ Seeking admission to grade: _____

Address: _____ City: _____

State: _____ Zip Code: _____

My child, _____, is an applicant for admission to Belvoir Christian Academy. I am requesting that this confidential reference form be completed and mailed to: Belvoir Christian Academy, 800 Belvoir Ave., Chattanooga, TN 37412 or faxed to: 423-622-0177.

Parent/Guardian Signature

Date

Please answer the following questions:

- 1 Individual completing this form is 1) Principal _____ 2) Guidance Counselor _____
3) Teacher _____ 4) Other (Title) _____
- 2 How long have you known the applicant? _____
- 3 Are you aware of any mental, physical, emotional or social issues that would hinder this applicant from being successful in a Christian educational setting? ____ Yes ____ No
- 4 If yes, explain: _____
- 5 To your knowledge, does the applicant come from a Christian home? _____
a well-disciplined home? _____, receive encouragement at home? _____
- 6 Has this student ever been suspended (in-school or out-of-school) or been asked to withdraw from school? ____ Yes ____ No
- 7 If yes, explain: _____
- 8 Does this applicant have any personal habits/attitudes that you feel are inconsistent with attendance at a Christian school? ____ Yes ____ No
- 9 If yes, explain: _____

- 10 Describe the applicant's strengths and weaknesses: _____

11 Recommendation of this applicant could best be described as a candidate for admission
 1) With confidence _____ 2) With reservation _____ 3) Not recommended _____

12 Comments or concern: _____

APPLICANT'S CHARACTERISTICS
 (Please check appropriate recommendation.)

CHARACTERISTICS	Excellent	Above Average	Average	Below Average	Improvement Needed
Cooperation with teachers					
Academic achievement					
Independent work habits					
Interaction with peers					
Anger management					
On-task/in-seat behavior					
Following directions					
Influence on others					

Thank you for the time and information you have offered in completing this *confidential* evaluation.

Signature: _____ Date: _____

Print Name: _____ Title: _____

Phone Number: _____ School: _____