



VANCOUVER CHRISTIAN HIGH SCHOOL
 8205 NE FOURTH PLAIN BLVD.
 VANCOUVER, WA 98662
 E-MAIL: VCHS@VANCOUVERCHRISTIAN.COM
 TEL: (360) 735-7915
 WWW.VANCOUVERCHRISTIAN.COM

STUDENT APPLICATION REFERENCE FORM

Parents: Please have the person filling out this reference form mail it directly to the school (address above). It is suggested you provide a stamped self-addressed envelope.

Student's name _____

1. How long have you known the applicant? _____

2. In what capacity do you know the applicant? _____

3. Do you know the family of the applicant? _____

4. Is regular church attendance and participation in church activities a characteristic of this applicant and his or her family? _____

5. How would you rate the applicant according to these qualities:

	<u>Poor</u>	<u>Fair</u>	<u>Average</u>	<u>Good</u>	<u>Superior</u>
a. Responds to authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Demonstrates responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Follows directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Demonstrates dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Demonstrates self-control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Demonstrates courtesy/kindness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Demonstrates flexibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Demonstrates leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Shows deference to others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Demonstrates honesty/integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comment on any of above: _____

6. Would you anticipate success for this applicant in a structured, controlled, academic environment?
 Yes No Comment: _____

7. In your opinion, how well does the applicant handle peer pressure? _____

8. Do you note any characteristics that would indicate difficulty for this applicant functioning in a disciplined academic situation? _____

9. Do you recommend this applicant for admission? _____

Signed: Name (sign, then print) _____

Address _____

Phone _____ **Date** _____