

PASTORAL REFERENCE FORM

WESTSIDE CHRISTIAN ACADEMY

Family Name: _____

Dear Pastor:

The above referenced family has enrolled, or is considering enrolling their child(ren) in Westside Christian Academy. To aid us in our assessment of the on-going spiritual training of the above family, would you please fill out the front and back of the Pastoral Reference Form and return it to Westside Christian Academy as soon as possible? Your responses will be kept confidential. Thank you for your prompt reply.

I. CHURCH PARTICIPATION

Using the following scale, please describe this family's church participation:

- 4 = Typically attends every meeting
- 3 = Attends every other meeting
- 2 = Attends only occasionally
- 1 = Rarely attends
- 0 = Never attends

	Father	Mother
A. Sunday Morning Worship	_____	_____
B. Adult Sunday School	_____	_____
C. Small Group Ministry	_____	_____
D. Prayer Meetings	_____	_____
E. Men's Fellowship/Bible Study	_____	_____
F. Women's Fellowship/Bible Study	_____	_____
G. Other _____ (Please describe)	_____	_____

II. MINISTRY/SERVICE INVOLVEMENT

List the areas of Christian ministry or service in which members of this family are active. Please note areas of leadership.

Father: _____

Mother: _____

III. PERSONAL SPIRITUAL LIFE

Please check appropriate boxes.

Father

Mother

Uncertain about level of spiritual life

Has made a profession of Christian Faith

Is a solid growing and serving Christian

Signature and title of person filling out this form

Please print your name in full

Name of Church

Phone Number

Address

City

State

Zip Code

Thank you very much for your response. When completed, please mail this form directly to:

WESTSIDE CHRISTIAN ACADEMY
ATTN: ADMISSIONS
23096 CENTER RIDGE ROAD
WESTLAKE, OH 44145

If you have any questions, please call us at: (440) 331-1300