

Life Christian Academy

Applicant Reference for Grades 6-12



Reference sent to: _____

whereLIFEhappens.org

We would appreciate your observations regarding this applicant who is seeking admission to Life Christian Academy. Thank you for your honest and forthright appraisal of this student. *Only school officials will read your responses.*

Please mail to: Rebecca Slattery, Registrar, Life Christian Academy, 1717 S. Union Ave., Tacoma, WA 98405 -1997
or FAX to: 253-879-9706

Name of Applicant _____ Applying For Grade _____

I KNOW THE STUDENT: ___ Well ___ Somewhat ___ By Sight ___ Not At All

1. MOTIVATION	PURPOSELESS	VACILLATING	USUALLY PURPOSEFUL	EFFECTIVELY MOTIVATED	HIGHLY MOTIVATED
2. INDUSTRY	SELDOM WORKS EVEN UNDER PRESSURE	NEEDS CONSTANT PRESSURE	NEEDS OCCASIONAL PRODDING	PREPARES ASSIGNED WORK REGULARLY	SEEKS ADDITIONAL WORK
3. INITIATIVE	MERELY CONFORMS	SELDOM INITIATES	FREQUENTLY INITIATES	CONSISTENTLY SELF-RELIANT	ACTIVELY CREATIVE
4. INFLUENCE & LEADERSHIP	NEGATIVE	COOPERATIVE BUT RETIRING	SOMETIMES IN MINOR AFFAIRS	CONTRIBUTING IMPORTANT AFFAIRS	JUDGEMENT RESPECTED MAKES THINGS GO
5. CONCERN FOR OTHERS	INDIFFERENT	SELF-CENTERED	SOMEWHAT SOCIALLY CONCERNED	GENERALLY CONCERNED	DEEPLY AND ACTIVELY CONCERNED
6. RESPONSIBILITY	UNRELIABLE	SOMEWHAT DEPENDABLE	USUALLY DEPENDABLE	CONSCIENTIOUS	ASSUMES MUCH RESPONSIBILITY
7. INTEGRITY	NOT DEPENDABLE	QUESTIONABLE AT TIMES	GENERALLY HONEST	RELIABLE, DEPENDABLE	CONSISTENTLY TRUSTWORTHY
8. EMOTIONAL STABILITY	NOT DEPENDABLE	EXCITABLE	USUALLY WELL-BALANCED	WELL-BALANCED	EXCEPTIONALLY STABLE
	APATHETIC	UNRESPONSIVE			
9. RESPONSE TO AUTHORITY	NOT ACCEPTABLE	ACCEPTABLE	SATISFACTORY	GOOD	EXCEPTIONAL
10. PARENTS OF APPLICANT	OBSTRUCTIVE	APATHETIC	COOPERATIVE	INTERESTED	VERY INVOLVED

Is the student eligible to re-enter your school? (if applicable) ___ Yes ___ No

Has the student been involved in: (please explain 'yes' answers) ___ Use of Alcohol ___ Use of Drugs

 ___ Unsatisfactory Social Adjustment ___ Disruptive Behavior ___ Dishonesty

Comments: _____

Please note significant strengths or weaknesses: _____

Estimate of applicant's future school success:

___ Little Success ___ May Encounter Some Difficulty ___ Average ___ Above Average ___ Superior

Specific recommendation: ___ Recommended ___ Not Recommended ___ Prefer Not to Make Recommendation

Are the parents aware of the issues that you have identified on this form? ___ Yes ___ No

School _____

Address _____ City _____ State _____ Zip _____

Print Name _____ Signature _____

Position _____ Phone () _____ Date _____