HERITAGE CHRISTIAN ACADEMY

Dear Pastor,

The parents of ______ (the "Applicant") have applied for his/her/their admission to Heritage Christian Academy. The School requires that one of their Pastors provide certain information regarding their church involvement as a prerequisite to admission. We would be grateful if you would take a moment to complete this form and return it **directly to the School** at the following Address:

Admissions Committee Heritage Christian Academy 649 Barr Road Lexington, South Carolina 29072

Your response will be kept **STRICTLY CONFIDENTIAL!**

Pastor's Name (Please Print):

Church's Name and Address:

Please answer the following information to the best of your knowledge and belief:

1. Approximately how long has the Applicant's family been involved with your Church?

years

2. Are either of the Applicant's parents a member of your Church? Yes / No

3. How well do you know the Applicant's family?

____ Not Well ____ Casually ____ Fairly Well ____ Intimately

4. How would you describe the extent of the Applicant's family's involvement in the worship and other activities of your Church?

_____ Actively involved & regularly attend worship services

_____ Regularly attend worship services & occasionally involved in other activities

_____ Attend worship services only, not otherwise involved

_____ Attend worship services occasionally

(Please turn over and complete rest of questionnaire on opposite side.)

5. How would you describe the home life of Applicant's family and the family's commitment to Biblical Christian values?

Very Good ____Good ____Fair ____Poor
Comment: _____
6. How would you describe the disciplinary environment in Applicant's home?
_____Appropriate _____Weak ____Too severe _____Inconsistent
7. Do you recommend this Applicant for enrollment? Yes / No

Thank you for your time and effort in completing this questionnaire. Feel free to provide any additional information you may believe important to our Admissions Committee on a separate sheet of paper. Please sign in the space indicated below, and return this form to the address indicated on the opposite side.

Pastor's Signature

Date