



# SAN FERNANDO VALLEY ACADEMY

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WWW.SFVA.ORG

## CHURCH/RELIGIOUS REFERENCE (NEW STUDENTS ONLY) 2023-2024 SCHOOL YEAR

*(To be filled out by Applicant's Pastor, Youth Pastor or Sabbath School Teacher)*

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_

**New Applicants for admission** to San Fernando Valley are considered on the basis of academic records and personal qualifications.

We will appreciate your cooperation in giving us your frank and honest estimate of the applicant.

**PLEASE MAIL THIS FORM TO THE SCHOOL PRINCIPAL (DO NOT RETURN YOUR STATEMENT TO THE APPLICANT)**

### I. BASIS OF EVALUATION

- How long have you known the above applicant? \_\_\_\_\_
- In what capacity? \_\_\_\_\_

### II. ESTIMATE OF PERSONAL QUALITIES

- Has the applicant made a personal commitment to Jesus Christ? Yes \_\_\_ No \_\_\_  
Don't Know \_\_\_ Comment: \_\_\_\_\_
- Has there been evidence of recent Christian growth? Yes \_\_\_ No \_\_\_  
Comment: \_\_\_\_\_
- What church services and activities does the applicant regularly attend?  
Sabbath School \_\_\_ Pathfinders/Adventurers \_\_\_ Vespers \_\_\_  
Worship Hour \_\_\_ Usher/Junior Deacon(ess) \_\_\_ Youth Choir \_\_\_  
Other \_\_\_\_\_
- Does the applicant possess any special interest or abilities? \_\_\_\_\_  
\_\_\_\_\_
- Can you tell us about any honors won or unusual achievement accomplished by the applicant? \_\_\_\_\_
- How much supervision do you think the applicant needs? Please check one:  
Constant \_\_\_ Frequent \_\_\_ Occasional \_\_\_ Minimal \_\_\_

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7. General Impression

PLEASE CHECK COLUMN YOU BELIEVE TO BE APPLICABLE	EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	POOR	INADEQUATE INFO	PLEASE MAKE SPECIFIC DESCRIPTIVE COMMENTS, IF APPLICABLE
CHRISTIAN INFLUENCE							
CHARACTER/ INTEGRITY							
LEADERSHIP							
COOPERATION							
PERSONALITY							
ASSOCIATES							
EMOTIONAL STABILITY							
MOTIVATION							

8. In your personal opinion, would this student be an asset to SFVA? Yes \_\_\_ No \_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Print Name \_\_\_\_\_

Church \_\_\_\_\_

Address \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_