

True Light Shines Academy

7428 Pearces Rd. | Louisburg, NC 27549 | 919-720-2864
Fax 919-554-6580 | www.truelightshines.com

CONFIDENTIAL PASTOR REFERENCE FORM

To the Pastor: The student named below is a candidate for admissions to True Light Shines Academy. Please complete the form and mail or fax to:

True Light Shines Academy Admissions Office, 7428 Pearces Rd, Louisburg, NC 27549 or fax to 919-554-6580

Name of Applicant _____ **Candidate for grade** _____

1. On a scale of 1-10 (10 being the highest), how well do you know the family? _____
2. Are you currently their pastor or associate pastor? _____
3. How would you evaluate the parents in the following areas:
 - a. Their church relationship, attendance, and loyalty _____
 - b. Their personal relationship to Jesus Christ _____
 - c. Their interest in having their child know and walk with the Lord _____
 - d. Do they command respect and obedience from their family? _____
4. To your knowledge, has this applicant accepted Jesus Christ as Savior? _____
5. How do the parents support their children's spiritual development? _____

6. What level of involvement does the applicant have in your church? _____

7. What are the first words that come to mind to describe this applicant? _____

I recommend this student:

___ enthusiastically ___ strongly ___ fairly strongly ___ with reservation

Pastor's or Associate Pastor's Signature _____ Dare _____

Position _____ Phone _____

Church _____

Address _____ City _____ State _____ Zip _____

I/We hereby authorize release of requested information to complete the admission process at TLISA. I/We understand this to be part of my student's application file.

Signatures of Parent/Guardian: _____ **Date:** _____

Please return within one week to:

True Light Shines Academy, 7428 Pearces Rd, Louisburg, NC 27549 or fax to 919-340-0187