



CONFIDENTIAL PASTOR/MINISTER/COUNSELOR RECOMMENDATION

Note: This form is to be returned directly to PCAA by the person completing this form and NOT by the Parent.

Student's Name _____
Last
First
Middle

EVALUATION (please check appropriate ratings)

Student Behavior/Conduct	Below Average	Average	Above Average	Excellent
1) Motivation				
2) Self-Discipline				
3) Has a Teachable Spirit				
4) Shows Initiative				
5) Social Adjustment with Peers				
6) Integrity and Honesty				
7) Respects Authority				
8) Fulfills Responsibilities				
9) Self-Control				
10) Involvement with Church Activities				

To your knowledge, has the applicant ever been suspended or expelled from school? _____

Does the applicant come from a home where Christian principles and values are taught? _____

Has the applicant been involved in any type of substance abuse? If so, please explain. _____

(please continue evaluation on the back)

Please use the following space to express your estimate of the applicant's possible success at and contribution to Prairie Central Adventist Academy. You are encouraged to comment candidly on those characteristics of the applicant that would distinguish him/her from other students:

Pastor Name: _____ Phone: _____

Church Name: _____

Signature: _____ Email: _____