



**SHANNON FOREST CHRISTIAN SCHOOL**

**Pastoral Reference Form**

*Instructions: Complete Section I and have your pastor, who is familiar with your testimony and spiritual development complete Section II. Your pastor needs to have known you for at least one year and must not be related to you. If you have recently moved or changed churches, please request this reference from your former pastor/church leader.*

**I. To be completed by parents (Please print)**

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_  
Address & Phone \_\_\_\_\_

Church Name \_\_\_\_\_ Pastor's Name \_\_\_\_\_  
Church Address and Phone \_\_\_\_\_

Names of children \_\_\_\_\_ Grade entering \_\_\_\_\_  
\_\_\_\_\_

In what capacity does your family serve in church? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Waiver of right of access to confidential statement: I, the undersigned, hereby voluntarily waive any right to inspect the content of this recommendation.*

Parent/Guardian's signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian's signature \_\_\_\_\_ Date \_\_\_\_\_

*Please provide your pastor with a stamped envelope addressed to:*

Shannon Forest Christian School  
Upper School Admissions  
829 Garlington Road  
Greenville, South Carolina 29615  
Ann: Andrea Culpepper

**II. To be completed by the pastor**

As applicants to Shannon Forest Christian School, the family is required to submit a pastoral reference. Please carefully consider your answers as you complete the following information. You must have known the applicants for at least one year and must not be related.

- 1. Church membership of parents:  Both parents  Father  Mother
- 2. Do you consider the children open to spiritual instruction?  Yes  No
- 3. What is your understanding of the family's relationship with God? \_\_\_\_\_  
\_\_\_\_\_
- 4. Describe the family's pattern of church attendance:  
 Attends services regularly  Attends occasionally (1-2 per month)  
 Attends occasionally (less than once per month)
- 5. How long have you known the family? \_\_\_\_\_

**Recommendation Concerning Acceptance**

Based on your knowledge of the family and their Christian testimony, would you recommend them as candidates for application to Shannon Forest Christian School?

Recommend  Recommend with reservations  Prefer not to recommend

Please explain (*optional*): \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Pastor

\_\_\_\_\_  
Date

---

*Thank you for completing this reference form.  
Please mail to:  
Shannon Forest Christian School  
829 Garlington Rd.  
Greenville, S.C. 29615  
Attn: Andrea Culpepper/Admissions  
or  
fax completed form to (864) 281-9372.*

---