



## Pastoral Reference

For admission to WCS, your pastor must complete this form and return it to our Admissions Office.

### STUDENT

\_\_\_\_\_

Last Name First M.I. Date

### CHURCH

Pastor's Name: \_\_\_\_\_

Last First M.I. Church Phone Number

Church: \_\_\_\_\_

Church Name Street Address City, State, Zip

How long have you known this family?

\_\_\_\_\_

### EVALUATION

Family church attendance:  Regular  Occasional  Infrequent

Family church membership:  Father  Mother  Student

Does your church have any conflicts with the WCS Statement of Faith?  Yes  No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

For admission to WCS, we require each family to have at least one parent who professes Jesus Christ as personal Savior.

In light of this, do you recommend this family for admission to WCS?  Yes  No

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

\_\_\_\_\_

\_\_\_\_\_

Pastor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**RELEASE** I grant permission to release this information to:

**Wilmington Christian School**

Admissions Office  
825 Loveville Road  
Hockessin, DE 19707

\_\_\_\_\_

Parent / Guardian Signature

\_\_\_\_\_

Date