California Lutheran High School

Student Admissions
31970 Central Ave
PO Box 1570
Wildomar, CA 92595

(951) 678-7000 (voice)
(951) 678-0172 (fax)

Pastor Reference Form

To be completed by the applicant:

Please complete the following information and give this form to your pastor.

Name: _____
First MI Last

Grade level applying for: _____ Freshman _____ Sophomore _____ Junior ____Senior

Student's signature: _____ Date: _____

Parent/Guardian's signature: _____ Date: _____

To be completed by pastor:

The following student from your congregation has submitted an application to California Lutheran High School. We would appreciate your help in providing the following information. To assist us in accurately evaluating and processing the application, we ask that you rate the applicant honestly and objectively. The completed form should be mailed or faxed directly to California Lutheran High School by the pastor who supplies the requested information. All responses will be considered confidential. Thank you for your assistance!

How long have you known the student? _____

How well do you know the student? _____ Very Well _____ Well _____ Casually

Please rate the student in the following areas:

Church Attendance:
____ Very superior
____ Above average
____ Average
____ Below average
____ Quite low
____ No basis
Comments: _____
_____
_____

Ability for learning God's Word:
____ Very superior
____ Above average
____ Average
____ Below average
____ Very limited
____ No basis
Comments: _____
_____
_____

Christian Living and Example:
____ Very superior
____ Above average
____ Average
____ Below average
____ Quite low
____ No basis
Comments: _____
_____
_____

Attitude toward learning God's Word:
____ Very superior
____ Above average
____ Average
____ Below average
____ Quite low
____ No basis
Comments: _____
_____
_____

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Please comment on the student's talents, special abilities or any physical, academic, or emotional handicaps which would affect the student's progress at California Lutheran High School. Additional information, comments, or suggestions regarding the students and his/his family which you think may be helpful to us are also welcome.

_____

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_____

Recommendation:

_____ Recommend without reservation _____ Recommend with reservation ____ Do not recommend

Comments: _____

_____

_____

_____

_____

_____

Name _____ Date _____

Phone (_____)_____ Best time to contact: _____

Signature _____