

NASHUA CHRISTIAN ACADEMY
“Passion for God and Compassion for People”
55 Franklin Street, Nashua, NH 03064
603-889-8892

**PASTORAL RECOMMENDATION
ELEMENTARY SCHOOL**

Release:

_____ is seeking enrollment at Nashua Christian Academy for the _____ school year. We hereby give our permission for you to complete this referral. We understand that your comments will be kept in strict confidence between you and the NCA administration.

Parent’s signature _____ date _____

To The Pastor:

At NCA, we believe in working as a three strand cord, involving the home, the school and the local church in the education of each student. We value your input regarding this student, and look forward to partnering with the family and your church to ‘train up’ this young man/woman in the Lord.

1. How long have you known the applicant? _____
2. How long has the family been attending your church? _____
3. Does the family attend regularly (weekly)? Y N
4. Does the student applicant attend regularly (weekly)? Y N
5. Is this family actively participating in any program or ministry in the church? Y N
6. Do you feel this family has both a commitment to, and application of, good Christian principles of child training? Y N
7. Is there anything within the family that you think could affect our decision to enroll their child(ren)? Y N
If yes, please elaborate _____
8. Do you feel you have access to this family for counseling in times of need? Y N

Does this applicant have any serious discipline problems to your knowledge? Y N If yes, describe _____

The student is: ___ recommended
 ___ not recommended
 ___ recommended with reservations

Pastor's signature _____ phone _____

Print Name _____

Church _____

Thank you for your time and cooperation in completing this referral. Your assessment will help us to better serve this student and family.

Please return this referral to: Nashua Christian Academy
 8 Franklin Street
 Nashua, NH 03064

Attn: Admissions