



PASTOR REFERENCE FORM

For the _____ Family

The above mentioned family has applied for admission of their child(ren) to Firelands Christian Academy. It is the goal of FCA to be an aid and reinforcement to the home as well as the local church. In keeping with this commitment, we request a pastoral reference in order to determine if our school ministry would in any way distract from your work with this family. Please prayerfully consider your recommendation and submit any additional comments or information you feel would be helpful in making a determination regarding acceptance.

We believe that all have sinned and come short of the glory of God, and that Jesus through the complete and finished work of the cross has redeemed man. We acknowledge that Jesus is the only begotten Son of God and that no man can come unto the Father but by Him. The Bible is God's infallible Word and it states that if you confess the Lord Jesus Christ, thou shalt be saved.

1. Do you as pastor agree with this statement? _____ If not, please explain _____

2. Is the family considered members in good standing? _____ If not, please explain _____

3. Is the family actively engaged in ministry at your church? _____ In what areas? _____

4. Do the parents give evidence of Biblical Christian faith and regeneration by the Holy Spirit? _____

5. Do the parents demonstrate a faithful spirit toward pastor and church, in their conversation and attitude? _____

6. In your opinion, would there be any problem allowing this family to be part of our educational institution? _____

CHILD'S SPIRITUAL RECORD

Has the student _____ accepted Jesus Christ as his/her personal Lord and Savior? _____
Students Name

Year? _____. Does the student attend at least one service per week at your church? _____

Has the student #2 _____ accepted Jesus Christ as his/her personal Lord and Savior? _____
Students Name

Year? _____. Does the student attend at least one service per week at your church? _____

I would like to talk personally with FCA about this family? Yes _____ No _____

Pastor's Signature _____ Date _____

Church Name _____

Address/Phone # _____

Please Remit to: **FIRELANDS CHRISTIAN ACADEMY**
P.O. BOX 334, SANDUSKY, OH 44871