

# Southern California Christian College



PO Box 5060  
Palm Springs, CA 92263  
760.770.7568

## PASTOR'S RECOMMENDATION STUDENT WAIVER OF RIGHT TO ACCESS

As provided under Section 438 (a) (1) (b) iii of the Family Educational Rights and Privacy Act of 1974, I hereby waive the right of access to confidential statements made on this reference form. Such waiver may not be required for admission to, receipt of financial aid from, or receipt of any other services or benefits from Southern California Christian College.

**TO THE APPLICANT:** Print your name, address, and telephone number on the lines below and give this form to your pastor. If a person other than your pastor or assistant pastor completes the form, an explanation from you should be sent to the Office of Admissions.

\_\_\_\_\_  
Applicant's Name Area Code/Phone Number

\_\_\_\_\_  
Street Address City State Zip

\_\_\_\_\_  
Applicant's Signature Date

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## TO THE PASTOR OR SUBSTITUTE

Each applicant for admission to Southern California Christian College must submit a recommendation from his or her pastor or substitute. Serious consideration is given to this recommendation, and therefore we request that you complete the form carefully and candidly. Because we expect straightforward comments, we will handle this recommendation with strictest confidence.

1. How long have you known the applicant? \_\_\_\_\_
2. How well do you know him/her? (check one)  
 Just by name and sight  Casually, have had a few personal contacts  
 Fairly Well. Have had a number of personal contacts  
 Have had a very close pastor-individual relationship
3. To the best of your knowledge, has the applicant made a personal commitment to Jesus Christ?  
 Yes  No  I don't know

PASTOR'S RECOMMENDATION:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Has the applicant received the Baptism of the Holy Spirit according to Acts 2:4?  
 Yes       No      Comments \_\_\_\_\_

5. To what extent is the applicant engaged in the activities of your church?  
 Is very irregular in attendance. Little interest in activities  
 Seldom participates in activities, although regularly attends  
 Is cooperative and usually willing to help in the various activities of the church  
 Enthusiastically engages in the activities for his or her age

6. In what form of Christian service has the applicant been regularly active? (e.g., Sunday School, Youth Groups, Choir, Orchestra, etc...) \_\_\_\_\_  
 \_\_\_\_\_

7. If the applicant does not participate, do you know why? \_\_\_\_\_

8. In comparison with other people you know, how would you rate this person in the following areas?

	Superior	Above Average	Average	Below Average	Inferior
Leadership					
Responsibility					
Loyalty to Church					

9. What do you consider his/her greatest strength? \_\_\_\_\_

10. What do you consider his/her greatest weakness? \_\_\_\_\_

11. Please check the terms which best describe the student's attitude toward the church and toward the things for which the church stands.

- |                                      |                                       |                                       |                                   |                                       |
|--------------------------------------|---------------------------------------|---------------------------------------|-----------------------------------|---------------------------------------|
| <input type="checkbox"/> Warmhearted | <input type="checkbox"/> Devoted      | <input type="checkbox"/> Enthusiastic | <input type="checkbox"/> Critical | <input type="checkbox"/> Contemptuous |
| <input type="checkbox"/> Arrogant    | <input type="checkbox"/> Sympathetic  | <input type="checkbox"/> Bitter       | <input type="checkbox"/> Tolerant | <input type="checkbox"/> Respectful   |
| <input type="checkbox"/> Rebellious  | <input type="checkbox"/> Antagonistic | <input type="checkbox"/> Loving       | <input type="checkbox"/> Passive  | <input type="checkbox"/> Grateful     |

12. In your estimation, this applicant's spiritual influence on his/her classmates will be: (Please check one)  
 Strengthening    Neutral    Injurious    Don't Know

13. Has the applicant's entire record been such that you would place full confidence in his or her integrity?  
 \_\_\_\_\_ Comments \_\_\_\_\_

14. Are there personality traits which hinder this applicant in his/her relationship with others?

Yes     No

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please Print Name; \_\_\_\_\_

Position \_\_\_\_\_ Church \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_