



## PASTORAL REFERENCE REQUEST

Dear Pastor/Church Administrator:

A Pastoral Reference is a required part of the admissions process at Langley Christian School. We appreciated your taking a few minutes to answer the following questions for the family who is seeking to enrol their child(ren) at Langley Christian School. If the family attends a large church where the pastor may not know the family, please have a ministry leader complete this form and indicate his/her position in the church in the space provided. Thank you.

**Father's Name:** \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_

1. How long have you known this family? \_\_\_\_\_

2. Are the parents members of your church? Yes No Other: \_\_\_\_\_

3. How often do the parents attend worship services? Regularly Occasionally Very Seldom

4. Are the parents active in church ministries? Yes No

Please specify: \_\_\_\_\_

5. Are the parents connected with a small group in the church? Yes No

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

6. Do you believe this family has shown a commitment to growth in their walk of faith?

7. Other pertinent information: \_\_\_\_\_

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

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

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

Email: \_\_\_\_\_

**or**

Ministry Leader's Name: \_\_\_\_\_ Ministry Leader's Signature: \_\_\_\_\_

Position: \_\_\_\_\_ Email: \_\_\_\_\_

General Office Email: \_\_\_\_\_ Phone number: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Please email or fax the completed form to the LCS Central Office.

Email: [development@langleychristian.com](mailto:development@langleychristian.com)

Fax: 604.994.0154

Phone: 604.533.2118

**All information will be respected with complete confidentiality.**

Thank you for your time and cooperation.