LIFE CHRISTIAN

Applicant Reference for Grades 6-12

We would appreciate your observations regarding this applicant who is seeking admission to Life Christian. Thank you for your honest and forthright appraisal of this student. *Only school officials will read your responses.*

Please mail to: Dean of Admissions, Life Christian, 1717 South Union Avenue, Tacoma, WA 98405
or FAX to: 253-761-9798 or 253-879-9706

Name of Applicant _____ Applying For Grade _____

I KNOW THE STUDENT: ___ Well ___ Somewhat ___ By Sight ___ Not At All

1. MOTIVATION	PURPOSELESS	VACILLATING	USUALLY PURPOSEFUL	EFFECTIVELY MOTIVATED	HIGHLY MOTIVATED
2. INDUSTRY	SELDOM WORKS EVEN UNDER PRESSURE	NEEDS CONSTANT PRESSURE	NEEDS OCCASIONAL PRODDING	PREPARES ASSIGNED WORK REGULARLY	SEEKS ADDITIONAL WORK
3. INITIATIVE	MERELY CONFORMS	SELDOM INITIATES	FREQUENTLY INITIATES	CONSISTENTLY SELF-RELIANT	ACTIVELY CREATIVE
4. INFLUENCE & LEADERSHIP	NEGATIVE	COOPERATIVE BUT RETIRING	SOMETIMES IN MINOR AFFAIRS	CONTRIBUTING IMPORTANT AFFAIRS	JUDGEMENT RESPECTED MAKES THINGS GO
5. CONCERN FOR OTHERS	INDIFFERENT	SELF-CENTERED	SOMEWHAT SOCIALLY CONCERNED	GENERALLY CONCERNED	DEEPLY AND ACTIVELY CONCERNED
6. RESPONSIBILITY	UNRELIABLE	SOMEWHAT DEPENDABLE	USUALLY DEPENDABLE	CONSCIENTIOUS	ASSUMES MUCH RESPONSIBILITY
7. INTEGRITY	NOT DEPENDABLE	QUESTIONABLE AT TIMES	GENERALLY HONEST	RELIABLE, DEPENDABLE	CONSISTENTLY TRUSTWORTHY
8. EMOTIONAL STABILITY	NOT DEPENDABLE / APATHETIC	EXCITABLE / UNRESPONSIVE	USUALLY WELL-BALANCED	WELL-BALANCED	EXCEPTIONALLY STABLE
9. RESPONSE TO AUTHORITY	NOT ACCEPTABLE	ACCEPTABLE	SATISFACTORY	GOOD	EXCEPTIONAL
10. PARENTS OF APPLICANT	OBSTRUCTIVE	APATHETIC	COOPERATIVE	INTERESTED	VERY INVOLVED

Is the student eligible to re-enter your school? ____ Yes ____No

Has the student been involved in: (please explain 'yes' answers) ____Use of Alcohol ____Use of Drugs

____Unsatisfactory Social Adjustment ____Disruptive Behavior ____Dishonesty

Comments: _____

_____

Please note significant strengths or weaknesses: _____

Estimate of applicant's future school success:

____Little Success ____May Encounter Some Difficulty ____Average ____Above Average ____Superior

Specific recommendation: ____Recommended ____Not Recommended ____Prefer Not to Make Recommendation

Are the parents aware of the issues that you have identified on this form? ____Yes ____No

School _____

Address_____ City _____ State _____ Zip _____

Date _____ Signature _____ Position _____ Phone ( ) _____