



SASKATOON
CHRISTIAN SCHOOL

STUDENT REFERENCE FORM

One/student

Student's Full Name: _____

This student has applied for admission to our school. To assist us with this process, please complete this form and return it to the school within seven days. New families will not be interviewed until this form is received.

A reference form is required for each student as part of the application process at Saskatoon Christian School. This reference must be filled out by a **non-family** member who is over 21 years of age and knows the child personally.

How long have you known the student?							
How do you know the student?							
How often are you in contact with the student? <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Occasionally <input type="checkbox"/> Seldom							
Circle the words which best describe the student:							
Tolerant	Spiritual	Loud	Follower	Flexible	Troubled	Prompt	Congenial
Organized	Meek	Careless	Dramatic	Easy-going	Lethargic	Humble	Neat
Tender	Shy	Responsible	Sociable	Forgiving	Cheerful	Articulate	Creative
Sincere	Studious	Defensive	Loving	Devoted	Quiet	Friendly	Proud
Joyful	Loyal	Vivacious	Active	Goofy	Angry	Respectful	Honest
Stubborn	Teachable	Indecisive	Open	Rebellious	Leader		
Use this space for additional information you would like us to know about this student that may affect their suitability for admission:							

Name:	Occupation:
Phone:	Email:



Signature:	Date (YYYY-MM-DD):
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Thank you for completing this reference as part of the process for admission to Saskatoon Christian School. The information you provide is confidential and will be used only in the admission process. It will not be shared with the student or their parents.

We ask that you send this completed form by mail, fax, or email directly to Saskatoon Christian School.

**Mail: Site 510, Box 8, RR5
Saskatoon SK S7K 3J8**

Fax: 306.343.0366

Email: admissions@saskatoonchristianschool.ca