

Asunción Christian Academy

Sacramento 1181
 Asunción, Paraguay
 Phone: 607-378
 Fax: 604-855



CONFIDENTIAL: School Director/Counselor Reference Form

This portion is to be completed by the applicant:

Family Name: _____

Name of Director/Counselor: _____

WAIVER OF RIGHT TO ACCESS: I, the undersigned, hereby voluntarily waive any right or privilege to inspect or challenge the content and comments expressed in this reference. I expect that the observations made shall remain confidential between the writer and Asunción Christian Academy.

Signature of Applicant: _____ Date: _____

(The signing of this waiver is voluntary.)

INSTRUCTIONS TO THE REFERENT: The family named above is applying for admission to Asunción Christian Academy, a Christian school whose purpose is to train Christian Leaders committed to excellence. It is highly essential that you be frank, fair, and accurate in your remarks and estimation. Although the applicant may voluntarily waive the right to review this reference, it is hoped that a spirit of openness and candor will exist between the applicant and the referent regarding the contents of this reference. Applicants are required to submit Reference Forms (and other documents) with the application. This ensures that the applicant knows the application is complete when submitted. After completing this form, please place it in the envelope, seal the envelope, and sign it across the seal. Return it to the applicant who will forward it, unopened, to Asunción Christian Academy with the application materials. Thank you.

1. How long have you known the student? _____ Years _____ Months

In what capacity? _____

2. Is the candidate in good standing and eligible to re-enter your school? Yes No

3. Has the student ever been suspended or expelled from your school? Yes No

Please explain: _____

4. Has the student been involved with tobacco, alcohol or drugs? Yes No

Please explain: _____

5. Does the candidate have any physical, social or emotional limitations? Yes No

Please explain: _____

Would you recommend that we accept this applicant? No Questionable Yes Strongly so

	Excellent	Above Average	Average	Below Average	Not Observed
Academic Achievement					
Academic Potential					
Integrity					
Initiative					
Cooperation with Peers					

General Comments: _____

Name (please print): _____

Signature: _____ Date: _____

School: _____