

# WESTLAKE CHRISTIAN ACADEMY

## PASTORAL REFERENCE


**Applicant:**

I waive my right to view this completed form.  
 I do not waive my right to view this completed form.

Signature

Date

*Pastor, the individual named below has applied for a position in our school. Please complete this Pastoral Reference Form and mail or fax it to the attention of the Administrator of Westlake Christian Academy. Feel free to attach additional comments if needed.*

Name of Applicant \_\_\_\_\_ Position Desired \_\_\_\_\_

1. How long have you known the applicant? \_\_\_\_\_

2. Are you currently his/her pastor or associate pastor? \_\_\_\_\_ How long? \_\_\_\_\_

3. How would you evaluate him/her in the following areas:

a) Their personal relationship with Christ? \_\_\_\_\_

b) Their involvement in ministry opportunities? \_\_\_\_\_

c) Is the applicant a regular/faithful attendee of services?  Yes  No  Unsure

d) Is this applicant a member in good standing at your church?  Yes  No If no, please explain on reverse.

Please check the appropriate boxes	Excellent	Good	Average	Poor	Unknown
Actively involved/serving in church					
Completes given or accepted tasks					
Interacts well with others					
Demonstrates spiritual maturity in judgments					
Maintains confidentiality					
Uses diplomacy and tact					
Controls demeanor under stress					
Is appropriate in their dress and appearance					
Exhibits compassion with hurting people					
Demonstrates Christian commitment					
Demonstrates Spiritual leadership					

Please provide any additional comments on the reverse side of this form.

Your printed name \_\_\_\_\_ Telephone \_\_\_\_\_

Name of your Church \_\_\_\_\_

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

Your signature \_\_\_\_\_ Date \_\_\_\_\_

Please list another individual who knows this applicant well and could serve as a secondary reference.

Print name \_\_\_\_\_ Telephone \_\_\_\_\_

**www.WestlakeChristian.org**

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