



## Olds Mountain View Christian School - Pastoral Reference

*The Pastoral Reference must be submitted directly from the pastor to the school.  
Please email to office@omvcs.ca or mail to Olds Mountain View Christian School,  
R.R. #2, Site 8, Box 2, Olds, AB T4H 1P3.*

This is a reference for the \_\_\_\_\_ family.

Parents/guardians: \_\_\_\_\_

Children: \_\_\_\_\_

*To the Applicant: Please print your surname, names of the parents/guardians, and the children in the spaces above and give the form to your Pastor to complete and return to us. If the parent/guardian is the Pastor, please refer the form to another Minister, or head layperson in your church.*

*To the Pastor or Substitute: Each family is requested to submit this recommendation from their Pastor. Serious consideration is given to your input and therefore we request that you complete the form carefully and candidly.*

To be completed by the Pastor

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Are you acquainted with Olds Mountain View Christian School?  Yes  No

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

Church Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

2. How long have they attended your church? \_\_\_\_\_

3. How well do you know the family?  Just by name and sight.  
 Casually (a few personal contacts)  
 Fairly well (several personal contacts)  
 Very well (close pastoral relationship)

4. In what ways are the family members participating in church activities? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. What is the family's attitude toward the church? \_\_\_\_\_

\_\_\_\_\_

6. In your estimation, the family's involvement at OMVCS would be:

- Beneficial to OMVCS     Neutral     Detrimental to OMVCS     Unknown

7. Please describe home factors (both positive and negative), of which you are aware, that will impact the students' success at OMVCS.

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8. Is there anything about the family, or specific student, that you would like to share that would impact the board's decision to accept or deny their application? \_\_\_\_\_

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9. Do you fully approve the students of this family attending OMVCS?     Yes     No



Would you or another member of your Pastoral Staff be willing to speak for a chapel at OMVCS?

- Yes     No

Do you have other recommendations for chapel speakers? \_\_\_\_\_

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