



SALISBURY

CHRISTIAN SCHOOL

SCHOOL REFERENCE FORM

TO BE COMPLETED BY THE APPLICANT'S PREVIOUS SCHOOL OR DAYCARE

The student named below has applied for admission to Salisbury Christian School. You have been asked by the student's family to complete this reference form. Thank you for your assistance.

STUDENT NAME: _____ APPLYING FOR GRADE: _____
DATE OF BIRTH: _____ CURRENT GRADE: _____

SECTION A: FOR APPLICANTS ENTERING GRADES 1 THROUGH 12

We would appreciate your observations in the areas listed below. Please circle the appropriate number.

Leadership:	Negative Influence	1	2	3	4	5	Positive Influence
Cooperation:	Uncooperative	1	2	3	4	5	Very Cooperative
Dependability:	Undependable	1	2	3	4	5	Very Dependable
General Character:	Frequently Displays Poor Character	1	2	3	4	5	Excellent Character
Emotional Stability:	Unstable/Frequent Difficulty	1	2	3	4	5	Well Balanced/ Good Disposition
Achievement:	Achievement Below Ability	1	2	3	4	5	High Achievement
Academic Performance:	Poor	1	2	3	4	5	Excellent

- | | | |
|--|-----|----|
| 1) Is the applicant eligible to re-enroll in your school? | Yes | No |
| 2) Has the applicant exhibited unsatisfactory adjustment to other students? | Yes | No |
| 3) Has the applicant had health problems which affected attendance and academic performance? | Yes | No |
| 4) Has the applicant been disciplined by school administrators? | Yes | No |
| 5) Does the applicant have difficulty focusing on tasks and/or seem easily distracted? | Yes | No |
| 6) Has the applicant been physically aggressive toward other students or school staff? | Yes | No |
| 7) Has the applicant ever threatened to physically harm students or school staff or to damage school property? | Yes | No |

For Middle and High School:

- | | | |
|---|-----|----|
| 8) Has the applicant been involved in incidents of plagiarism? | Yes | No |
| 9) Has the applicant been involved in the use, sale or trade of alcohol, tobacco products, Drugs, or weapons? | Yes | No |

If you answered yes to questions 2 – 9, please explain: _____

PLEASE GO TO SECTION C (on reverse)

(over)

SECTION B: FOR APPLICANTS ENTERING PRE-K OR KINDERGARTEN

- | | | |
|--|-----|----|
| 1) Is the applicant eligible to re-enroll in your school/daycare? | Yes | No |
| 2) Has the applicant exhibited unsatisfactory adjustment to other students? | Yes | No |
| 3) Has the applicant had health problems which affected attendance and academic performance? | Yes | No |
| 4) Has the applicant been disciplined by school administrators? | Yes | No |
| 5) Does the applicant have difficulty focusing on tasks and/or seem easily distracted? | Yes | No |
| 6) Has the applicant been physically aggressive toward other students or school staff? | Yes | No |

If you answered yes to questions 2 – 6, please explain: _____

PLEASE PROCEED TO SECTION C

SECTION C: FOR ALL APPLICANTS

1) How would you describe parental support and involvement? _____

2) Please provide any additional information that may help us to ensure that SCS is a good placement for this student and that he/she has a good chance of success:

3) Is there anything you would prefer to discuss by phone? Yes / No
If yes, an administrator from SCS will call you during the time you specify here.

YOUR NAME AND TITLE: _____ **DATE:** _____

SIGNATURE: _____

TIME YOU MAY BE REACHED: _____ **DAYTIME PHONE:** _____

SCHOOL NAME: _____

SCHOOL ADDRESS: _____

Thank you for your assistance. Please return this form to the Admissions Office of Salisbury Christian School by email, fax, or mail as soon as possible.

**807 Parker Road
Salisbury, MD 21804**

dhudson@salisburychristian.org

**Fax: 410-546-4674
Phone: 410-546-0661**