



CONFIDENTIAL REFERENCE FORM

Student's Name: _____ Applying to Grade: _____

The student named above is applying for admission to Forest Hills Lutheran Christian School. Please complete this form and return it to FHLCS.

To be completed by a teacher, counselor, or principal.

PLEASE CHECK THE APPROPRIATE BOX

Subject	Above grade level	At grade level	Below grade level
English Skills			
Reading ability			
Comprehension			
Math Skills			

PLEASE CIRCLE ONE RESPONSE PER CATEGORY

Initiative, Drive	Outstanding, resourceful	Well above the average	Generally strong	Occasionally weak, lacking	Very weak	Not known
Leadership & Responsibility	Outstanding	Commendable	Capable	No sign of leadership	Record of irresponsibility	Not known
Integrity	Superior	Strong	Strengths out-weigh weakness	Somewhat weak	Very questionable	Not known
Respect	Very Respectful	Mannerly	Usually polite	Sometimes disrespectful	Very disrespectful	Not known
Peer Relationships	Highly respected	Well liked	Accepted	Difficulty in cultivating	Unskilled socially	Not known
Emotional	Extremely well balanced	Well balanced	Usually no problem	Some problems	Many problems	Not known
Summary as a Student	Outstanding	Above average	Average	Below average	Poor	Not known

Please see back page

How long have you known this student? _____

In what capacity have you had contact with this student? _____

Based on your knowledge of this student, would you predict success in a structured, Christian environment?

Additional Comments:

Name Title Phone Number

Signature Date

Please return form to:
Trinity Lutheran Church & School
5520 NE Killingsworth, Portland, OR 97218

email: office@trinityportland.org
call 503-288-6403 if questions