

CONFIDENTIAL CHURCH LEADER'S RECOMMENDATION

Dear Pastor or Church Leader,

Harvester Christian Academy exists for the purpose of training young men and women who will reclaim our culture for Christ. This is accomplished in the school environment by training the mind to lead and the heart to serve.

In keeping with this purpose, Harvester only accepts children from Christian families, that is families in which at least one of the parents can give a credible profession of saving faith in Jesus Christ and who are regular participants in the life of a local church.

Please complete this *confidential* form and return it to us as soon as possible. The student application cannot be processed until we receive this form. Thank you for your assistance.

Parent(s) Name	Student NameChurch Leader's Name			
Church				
Please indicate the t	frequency of attendance in Sunday worship	p: (check o	one in each row)	
Father: Mother: Student:	weekly monthly irreg weekly monthly irreg weekly monthly irreg	ular	seldom	
Would you consider	r this family as active members in good sta	anding? Y	esNo	
For how long?				
How would you cha Biblical standard of	aracterize this family's relationship to God conduct?	l and their	submission to a	
How would you des	scribe the applicant's family life?			
Is the child active in	n church youth or children's program?	Yes	No	
Do you consider the	e applicant open to spiritual instruction?	Yes	No	
Do you recommend	this family for admission to Harvester Ch	nristian Ac	•	

Comments (optional):			
Signature			Date:
Church Name and Address			
	Phone:	Ext	
After completion, please return	to:	Admissions Office Harvester Christian Academy 4241 Central Church Road Douglasville, GA 30135 Phone: 770-942-1583 Fax: 770-942-9332	