

CONFIDENTIAL CHARACTER REFERENCE FORM

6TH-12TH GRADE



TO BE FILLED OUT BY APPLICANT

Please deliver this form to a pastor, counselor, teacher or other evaluator. The evaluator will mail these forms directly to the Admissions Office. By submitting this evaluation form and in consideration of having this evaluation and your application considered by Aurora Christian Schools, you hereby release said member, its employees and representatives, the evaluator and the evaluator's employer from any and all claims and liability that may arise from the providing, obtaining or using the form and the substance of the information provided by the evaluator. All information provided on the attached evaluation form will be held in the strictest confidence and will not be shared with students, parents or guardians. This evaluation form will remain confidential.

Applicant's Name _____
last (family) name first (given) name middle name jr.,etc.

Applying for Grade _____ Age level _____ Male Female

Applicant's current school _____

Address of current school _____

Telephone _____

Applicant's signature: _____ Date: _____

TO BE FILLED OUT BY EVALUATOR

Information will be kept confidential. Please be as thorough as possible.

Name: _____

Position: _____ School/Church/Organization: _____

Email: _____ Phone: _____

How long have you known the applicant? In what role?

What is the greatest strength of this applicant?

What is this applicant's greatest weakness?

What factors in the applicant's home life would help or hinder his/her success at Aurora Christian?

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What is the applicant's attitude toward authority and rules?

Do you have any additional information that would help us to meet the needs of this student?

From what you know, would you recommend this student for Aurora Christian?

Below, please evaluate the applicant in the following categories, in relation to other students you have worked with.

	POOR		AVERAGE		EXCELLENT
Academic achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Study habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense of humor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conduct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spiritual fervor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relationship with peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relationship with adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments: (please feel free to attach additional materials if needed)

Evaluator's Signature

Date

Please submit evaluation form to:
 Aurora Christian Schools Attn: Admissions Office
 2255 Sullivan Road Aurora, Illinois 60506
 p. 630.892.1551 f. 630.892.1692
www.aurorachristian.org