

Parental Reference Form: Samuel Student

Name of Applicant: _____

I am seeking entrance to the Samuel Program at Canadian Baptist College and would appreciate your submission of this form evaluating me as a person and my potential in the program. Since all concerned are seeking God's will in this matter please be as frank as possible.

Signature of Applicant: _____

PLEASE BE ASSURED THIS FORM WILL BE HELD IN CONFIDENCE.

Please evaluate your child in the following areas by marking: 5 for outstanding; 4-above average; 3-average; 2-below average; 1-poor or N for no information. Please make comments *on the back of this sheet for any below average or poor responses or for additional comments.*

Social Maturity	5	4	3	2	1	N
Spiritual Maturity and Sensitivity	5	4	3	2	1	N
Character	5	4	3	2	1	N
Seriousness of Purpose	5	4	3	2	1	N
Emotional Stability	5	4	3	2	1	N
Self Discipline	5	4	3	2	1	N
Leadership Skills	5	4	3	2	1	N
Academic Ability	5	4	3	2	1	N
Skill in Relating to Others	5	4	3	2	1	N
Reliability and Responsibility	5	4	3	2	1	N

Please comment on any weaknesses, habits or prejudices that might hinder effective Christian work: _____

What strengths have you observed in your child? _____

Why are you encouraging your child to attend CSBS&C rather than a university/college? _____

How do you plan to support your child? _____

Do you recommend your child for admission to CBC? Yes No If yes, please check one:

With Enthusiasm With Confidence With Some Reservations With Reluctance

Please elaborate on any concerns you might have: _____

Name: _____ Phone: _____

Address: _____

Signature: _____

Thank you for your response! Please mail directly to CSBS&C at this address:

Admissions Office, Canadian Baptist College, 200 Seminary View, Cochrane, AB T4C 2G1 Canada