

# Student Reference Form

## For Gold Coast Christian School

Thank you for taking the time to fill out this information about this child. This is just to help us get to know the student better to be sure that they will thrive at our school.

Student Name: \_\_\_\_\_

Person filling out reference: \_\_\_\_\_

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Please rate this child from 1 (low) to 4 (high) in each of the categories listed. Please circle the appropriate number.

### Character

Honesty	1	2	3	4
Integrity	1	2	3	4
Concern	1	2	3	4
Leadership	1	2	3	4
Initiative	1	2	3	4
Motivation	1	2	3	4
Independence	1	2	3	4

General comments: \_\_\_\_\_

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### Peer Relations

Cooperation	1	2	3	4
Independence	1	2	3	4
Sharing	1	2	3	4
Self-control	1	2	3	4

General comments: \_\_\_\_\_

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### Work Habits

Completes tasks	1	2	3	4
Follows directions	1	2	3	4
Contributes to class	1	2	3	4
Does work neatly	1	2	3	4

General comments: \_\_\_\_\_

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**Behavior**

Rarely required reprimand	1	2	3	4
Sometimes acts up, not a problem	1	2	3	4
Acts kindly towards others	1	2	3	4
Is helpful to others	1	2	3	4

General comments: \_\_\_\_\_

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**Social ability**

In center of social group	1	2	3	4
Well accepted by group	1	2	3	4
Not a social participant	1	2	3	4

General comments: \_\_\_\_\_

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**Other Questions:**

1. How long and in what circumstances have you known the applicant? \_\_\_\_\_  
\_\_\_\_\_
2. Do you think this student will be a good addition to our school? Why? \_\_\_\_\_  
\_\_\_\_\_
3. Please add any other comment you have that have not been address and that you feel would important for us to be aware of. \_\_\_\_\_  
\_\_\_\_\_

Would you be willing to have us contact you by phone? \_\_\_\_\_ Phone # \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return this form to:

Gold Coast Christian School  
2175 Newmark Ave.  
Coos Bay, OR 97420

Thank you so much for your help!