



MARANATHA CHRISTIAN BILINGUAL SCHOOL

~ ACADEMIC FRUITS WITH SPIRITUAL ROOTS ~

2871 Highway H • Farmington, MO 63640 • (573) 210-4453

www.christianbilingualschool.org • maranathaschool63640@gmail.com

STUDENT RECOMMENDATION FORM

Student Information

Student's Full Name

Parent/Guardian First and Last Names

Age

Date of Birth

Gender

EVALUATORS INFORMATION

Full Name

Relationship to Student

Years Known

Street Address

City and State

Zip Code

Phone Number

Email Address

Request for Recommendation

This student has applied for admission to Maranatha Christian Bilingual School and has indicated you as a willing reference on their behalf. Please complete the attached form and return it to us in the addressed and postage paid envelope that is enclosed. Since we are unable to process the student's application until all reference forms are received, your prompt reply is appreciated. All information you provide is confidential. Thank you for your help!

Consent to Release Information

Parent/Guardian Signature

Date

Your signature indicates consent for the sending evaluator to provide information and a personal evaluation of your child to Maranatha Christian Bilingual School. Please submit three Student Recommendation Forms. References must be adults who are not family members (i.e. Pastor, Church Class Teacher, Youth Club Director, Day Care Teacher or Babysitter). These records must be received in order for your application to be processed. Information received will be kept confidential and is used only for admission purposes.