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website: www.calvinchristian.school

Pastor's Questionnaire Form for International Families

Name of the family		Date	
Name of the student		Grade	
Pastor's Name:		_	
Church name:			
Mailing Address:			
Telephone	Fax	Email	
1. Does the family attend your	church faithfully?	Yes No	
	Monthly Less t		
Comments:			
2. How long have they attended		Are they members?	
4. Describe the spiritual maturi	ty of the PARENTS ?		
6. What is the STUDENT'S spi	ritual maturity?		
7. Any further comments that v	would help us understand this t	family?	
Please sign this, then mail or f	ax directly to the school using	ng the information at the top of	the page.
Pastor's Signature		Date	