



POLARIS CHRISTIAN ACADEMY
2150 East Powell Road
Lewis Center, Ohio 43035

SCHOOL ADMINISTRATOR'S RECOMMENDATION

To be completed and returned by your present school administration

STUDENT'S NAME _____ GRADE _____
 ADDRESS _____ YEAR _____
 _____ PHONE _____
 PARENTS' NAMES _____
 Father _____ Mother _____

The above named student has applied for entrance into Polaris Christian Academy.
 Would you please provide the following information for us?

1. Is this family active in your school?

Father _____ PTA _____ Volunteer _____ Other _____
 Mother _____ PTA _____ Volunteer _____ Other _____

2. Check the following which apply to this student:

| <u>Academic</u> | <u>Attendance</u> | <u>Discipline</u> |
|--------------------|-----------------------------|-------------------|
| ____ Above Average | ____ Absent 10 days or less | ____ Suspended |
| ____ Average | ____ Absent 11-19 days | ____ Expelled |
| ____ Below Average | ____ Absent 20 days or more | ____ Truant |

Please provide comments concerning this student's character and any additional information that will assist us in making a decision regarding admission to this school.

Please return this information to Polaris Christian Academy. Thank you for your assistance.

ADMINISTRATOR'S SIGNATURE _____ POSITION _____
 NAME OF SCHOOL _____ PHONE _____
 SCHOOL ADDRESS _____ DATE _____