



TRINITY CHRISTIAN ACADEMY

"Train up a child in the way he should go: and when he is old, he will not depart from it." Proverbs 22:6

Dear Pastor,

Trinity Christian Academy was established in 1993 for the purpose of assisting parents in the responsibility of nurturing and training their children in the light of God's Word.

The church, home and school are vital components in the lives of the students of Trinity Christian Academy. A consistent reinforcement of Christian values and lifestyle is important for a solid foundation on which students can develop a life of service to the Lord. Whatever vocation students plan to enter, Trinity Christian Academy seeks to prepare them for a life of service.

Your information regarding the participation of the family on the attached form is very important to the admission process. We request that your comment be candid and honest to best serve the family and Trinity Christian Academy.

We appreciate your willingness to complete this form and return it to our school at your earliest convenience. May you experience God's richest blessings in your work with His people.

Sincerely,

Rev. Stephen Fava
Principal

Pastor Recommendation Form
For Admission

Trinity Christian Academy

2119 Hartford Ave. | Johnston, RI 02919
Phone:(401) 934-0202 | Fax:(401) 934-1754
www.trinityri.org | info@trinityri.org

Section I

This section is to be completed by the family applying for admission.

After completing Section 1, please have your pastor complete section 2 and return form directly to Trinity Christian Academy.

Family Name: _____

Address: _____

Church Name: _____

Church Address: _____

Church Telephone Number: () _____

Names & Grades of Children Applying for Admission:

_____	_____
_____	_____
_____	_____

Section II

This section is to be completed by the Pastor.

Your responses to the following question will remain confidential to the Administration. Please return completed for to TCA.

Is the above family a member of your church? Yes _____ No _____

What is the nature of their involvement in the church? (activities, leadership, support, etc.)

How often does the family attend church? Weekly _____ Often _____ Occasionally _____ Never _____

How does this family demonstrate a personal commitment to Jesus Christ?

Is there any additional information about this family that would be helpful to their admission into TCA?

Pastor's Name (Please Print)

Pastor's Signature

Date

After completion, please return this form to the address above.