



Referral Form

Student(s) Requesting Enrollment _____

Name of Reference _____

Email of Reference _____ Phone # of Reference _____

What is your relationship to this family and student (s)? _____

How long have you known this family? _____

Have the parents and/or student(s) professed faith in Christ? _____

To your knowledge, what church body is this family a part of? _____

Are they active members of their church? _____

Please share a few strengths you see in the student(s) _____

Please share any weaknesses of the student(s) _____

On a scale of 1-10, how respectful is this family? _____ Student(s)? _____

On a scale of 1-10, how submissive to authority is the family? _____ Student(s)? _____

Do you have any reservations in recommending this student to BHC? _____

Is there anything else you would like for us to know about this student and/or family? _____

Is there anyone else you recommend we contact for more information? _____

Thank you kindly for taking the time to complete this referral.