

ReACHE

Reservoir Area Christian Home Educators

Membership Recommendations for New Applicants

Name _____ Date _____

1. Do you have reservations about this family joining our group? _____

2. How do you know this family? _____

3. How long have you known this family? _____

4. Are you comfortable with everyone in this family being around young children or teaching a class? _____

5. Do you recommend this family for ReACHE membership? _____

6. Would you leave YOUR child in the care of this family? _____

7. Do you have anything you'd like to add about this family? _____
