

Date: _____

Pastor/Staff Recommendation Form for ReACHE *Reservoir Area Christian Home Educators*

We ask that all ReACHE Applicants have a Pastor or Staff member from their church fill out a recommendation form for the family. This form may be sent by mail or from a church associated email address. We ask that the form be sent directly from the staff member and NOT through the applicant. This form will remain confidential between the staff member and the ReACHE Board. We ask that the Pastor/Staff Member prayerfully fill out this form to the best of their knowledge.

Applicants Name: _____

Pastor/Staff Member Name: _____

Church Name: _____

Job Title: _____ Work Phone: _____

What capacity do you know this family? How long have you known them? _____

In your opinion, does this family demonstrate a commitment to homeschooling? (If not, why) _____

Would you trust this family with the care of your children? _____

Do you have any reservations about any member of this family being around or caring for children? _____

What would you say about this person's/couple's walk with God? _____

We believe it is essential to handle conflict resolutions according to God's Word (Matthew 18:15-17). Would you agree to participate in Christian mediation should a problem arise with this family's involvement in our group? _____

Do you have any reservations about the applicant or their children being part of our group? _____

This form may be mailed by Pastor to ReACHE Membership Director, P.O. Box 4052, Brandon, MS 39047 or emailed from a church email address to reache.org@gmail.com

Thank you for your assistance, we greatly rely and appreciate all you do!!

ReACHE Membership Director