



**PASTORAL RECOMMENDATION: Please make sure both you and your pastor reviews our Statement of Faith prior to filling the form.**

### Section One

Parent Name(s) \_\_\_\_\_

Student Name \_\_\_\_\_

Church Name \_\_\_\_\_

Church Address \_\_\_\_\_

Pastor Name\* \_\_\_\_\_ \* May be someone else in leadership (i.e., elder, deacon) if they are better able to evaluate your student, or if the pastor of the student is his/her father.

### Section Two

Dear Pastor: This family is making an application to Pietas Classical Christian on behalf of the student named above. Parents are to be professing Christians and to agree to the Statement of Faith of PCC. We are asking you to help us evaluate this student for admission. Please note that any information or comments shared by you will be kept completely confidential.

Is at least one parent a member of your church?    Yes    No

How long have you known this family? \_\_\_\_\_

How frequently do they attend worship? \_\_\_\_\_

Would you recommend the student for admission to Pietas Classical Christian?    Yes    No

Do you have any additional comments you feel would be helpful to us?

\_\_\_\_\_  
\_\_\_\_\_

If we need further information, may we contact you? \_\_\_\_\_ Phone \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_

Thank you, Pastor, for your help with this application.

**An electronic signature is sufficient when submitting the application. Please email the completed application (fillable PDF) to [admissions@pietasclassical.com](mailto:admissions@pietasclassical.com).**