

**Madison Christian School**  
45369 234th St., Madison, SD 57042

**Application for Admission: Pastor's Recommendation**

**Part I:** Parent(s), please fill in the first section of this form. Then give it to your pastor with the attached, stamped envelope. The pastor should complete Part II and mail it directly to the school.

Name of applicant(s) \_\_\_\_\_  
(please list all children applying for admission to MCS)

Name of parent(s) \_\_\_\_\_

Name of church \_\_\_\_\_ years attended there \_\_\_\_\_

Name of pastor \_\_\_\_\_ church phone \_\_\_\_\_

**Part II:** Pastor, please fill in this recommendation form for the applicant and family listed above. This form must be returned directly to Madison Christian School. A SASE envelope should be included with this form for your convenience.

1. How often do the applicant and his/her family attend your church activities?

\_\_\_\_\_ once a week    \_\_\_\_\_ two or more times a week    \_\_\_\_\_ monthly    \_\_\_\_\_ occasionally

2. Is the child(children) active in the youth program of the church?    \_\_\_\_\_ YES    \_\_\_\_\_ NO

3. Would you consider the child(children) open to spiritual instruction?    \_\_\_\_\_ YES    \_\_\_\_\_ NO

4. Please list the ways this family is involved with your church other than attendance. \_\_\_\_\_

5. Do you feel that the applicant would benefit from education at a Christian school? Why or why or why not? \_\_\_\_\_

6. Would you recommend this applicant for admission to MCS?    \_\_\_\_\_ YES    \_\_\_\_\_ NO

7. Additional comments: \_\_\_\_\_

Pastor's Signature \_\_\_\_\_ Date \_\_\_\_\_