

Parents,

Please complete the top portion of this form, and then ask your pastor to complete it as part of your application. Your application will not be processed until all forms are received.

Parents' Name(s): _____

Children's Names: _____

Reference's Name: _____ Relation to Family: _____

Pastor,

The above family is applying for membership in Roots Christian Home Education Fellowship. Thank you for your assistance in providing a reference for this family as, together, we seek to serve the needs of God's people and our Lord Jesus Christ. Information you provide will be used in assessing their application and will remain part of the family's confidential file.

If you have any questions regarding the completion of this form, please contact the Roots Christian Home Education Fellowship Board of Directors at board@rootshomeed.com

Please complete this form and email it to TammyE@rootshomeed.com.

1. How long have you known this family?
2. Do the parents attend church regularly? Yes No
3. Do the children attend church regularly? Yes No
4. Are the parents active in church activities? Yes No
5. Are they followers of Jesus Christ? Yes No
6. If not, are they actively exploring what it means to be a committed follower of Jesus Christ? Yes No
7. In a sentence or two, please indicate the applicant's commitment to Jesus Christ and His church:

8. Do you think this family will be supportive of a Christ-centered home education program? Yes No

Comments: _____

9. Are you willing to work with Roots and this family should a need (problem) arise where such cooperation would benefit the student or family? Yes No

10. Please provide any comments concerning the family that you feel may benefit our staff:

11. Would you like further contact at this point by phone? Yes No

Reference Phone: _____ Reference e-mail address: _____

Reference Signature: _____ Date: _____