



CENTRAL VALLEY CHRISTIAN

S C H O O L S

Pastor/Church Leader Questionnaire

Applicant, please complete this section:

Name: _____

Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Position applying for: _____
_____ Elementary _____ Middle School _____ High School

Pastor/Church Leader completes this section:

As part of our application requirements, we ask each prospective employee at CVCS to have their Pastor complete this recommendation form. We request this information because we believe that teachers and staff members in our Christian School must be actively involved in a local church. By answering these questions, you enable us to determine their participation as a member of your congregation. Thank you for your assistance. We trust God's richest blessings upon your ministry.

1. Do you personally know the applicant? _____

2. How long has the applicant been a member? _____

3. Describe his/her worship service attendance. _____

4. In what ministries of the church is this person presently involved? _____

5. Is this person a member in good standing at your church? Yes No

Pastor's Name _____

Pastor's Signature _____ Date _____

Name of Church _____

Send this completed release form to the attention of Dane Moll at Central Valley Christian Schools. Address and fax number are listed below.

