



# *Sunnyside Christian School*

## *Elementary*

811 NORTH AVE  
SUNNYSIDE, WA 98944  
(509)837-3044

## *High School*

1820 SHELLER ROAD  
SUNNYSIDE, WA 98944  
(509)837-8995

### **Student Reference Form**

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

Parent Name \_\_\_\_\_

Dear Teacher/Counselor,

An application has been submitted to Sunnyside Christian School for the above named student. To assist us in providing the best educational placement for the student, it would be very helpful if you would complete the following questionnaire. Please return this form as soon as possible. Thank you for your assistance.

Your response will, of course, be held in the strictest confidence.

About Sunnyside Christian School:

Sunnyside Christian School was founded in 1947 to provide a high quality education based on the Word of God and centered in Jesus Christ. Sunnyside Christian offers a co-educational program for K-12 students served on two campuses. SCS is a parent operated interdenominational school serving some 40 churches in the Lower Valley.

SCS teachers are certified by the state. In fact, all aspects of the school are fully approved by the state of Washington. SCS provides an extensive curricular and extra-curricular program that gives a broad educational experience.

If you would like to have any questions answered or clarified feel free to call the school.

Del Dykstra,  
Administrator

Sunnyside Christian School  
Previous Teacher/Counselor – Student Reference Form

Date \_\_\_\_\_

Teacher \_\_\_\_\_

Student \_\_\_\_\_ Applying for entrance into \_\_\_\_\_ grade.

Please rate this student from 1 (low) to 4 (high) in each of the categories listed. Circle the appropriate number.

Character

Honesty	1	2	3	4
Integrity	1	2	3	4
Concern	1	2	3	4
Leadership	1	2	3	4
Initiative	1	2	3	4
Motivation	1	2	3	4
Independence	1	2	3	4

General comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Peer Relations

Cooperation	1	2	3	4
Independence	1	2	3	4
Sharing	1	2	3	4
Self-control	1	2	3	4

General comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Work Habits

Completes tasks	1	2	3	4
Follows directions	1	2	3	4
Contributes to class	1	2	3	4
Does work neatly	1	2	3	4

General comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Academic ability

Performs at ability level	1	2	3	4
Often becomes discouraged	1	2	3	4
Noted for not finishing work	1	2	3	4
In trouble academically	1	2	3	4
Works hard at completing tasks	1	2	3	4

**Sunnyside Christian School**  
**Previous Teacher/Counselor – Student Reference Form**

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General Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Behavior**

Rarely requires reprimand	1	2	3	4
Sometimes acts up, not a problem	1	2	3	4
Often disturbs the class	1	2	3	4
Constant discipline problem	1	2	3	4

General Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Social Ability**

In center of social group	1	2	3	4
Well accepted by group	1	2	3	4
Responds socially on occasion	1	2	3	4
Not a social participant	1	2	3	4

General Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1. How long and in what circumstances have you known the applicant? \_\_\_\_\_  
\_\_\_\_\_
2. Do you think this applicant should enroll at SCS? (We are interested in students with academic potential and who will contribute positively to the school.) \_\_\_\_\_  
\_\_\_\_\_
3. Please add any other comments you have that have not been addressed and that you feel would be important for us to be aware of. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Would you be willing to have us contact you by telephone? \_\_\_\_\_ Phone # \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name of School \_\_\_\_\_

Address of School \_\_\_\_\_

Please return this form to: Sunnyside Christian School  
Attn: Admissions  
811 North Ave.  
Sunnyside, WA 98944