



Request for CCUCA Admittance

All families requesting admittance to Calvary Chapel Upland Christian Academy that do not call Calvary Chapel Upland their home church are required to turn in the Admittance Application, along with a letter of recommendation and Confidential Pastor's Referral.

Upon receipt of your application, you will be requested to schedule a meeting with CCUCA Administrative Staff regarding your admission into the school.

CCUCA is a ministry of Calvary Chapel Upland and is subject to the authority of the pastoral staff. The school reserves the right to refuse any application based on the information received.

Admittance Application

Date of Application: _____

Husband's Name: _____

Wife's Name: _____

Home Address: _____

Telephone Number: (____) _____ Cell Number (____) _____

Email: _____

Children's Names: _____

What church are you attending: _____

How Long? _____

How many services do you attend weekly? _____

How did you hear about CCUCA? _____

Do you know any families who attend CCUCA? _____

What is your reason for choosing to homeschool? _____

How long have you homeschooled? _____

What are your goals for homeschooling (ie: long term, short term?) _____

Please include your letter of recommendation from a close friend or member of your church body who can give an accurate character reference of your family. *A letter from another homeschooling family would be beneficial.*

Please have your pastoral staff fill out the attached Confidential Pastor's Referral and instruct them to mail it to Calvary Chapel Upland at: 2060 W. 11th St. Upland, California 91786

Thank you for your interest in CCUCA. Your application will be prayerfully considered and you will be contacted ASAP.

Confidential Pastor's Referral for Calvary Chapel Upland Christian Academy

The family listed is requesting admittance to Calvary Chapel Upland Christian Academy (homeschool PSP). It is a requirement that we receive the completed Pastor's referral letter for consideration to be admitted into the school. Please fill out the following, accurately and honestly, to the best of your knowledge. Your prompt cooperation in filling out this form on behalf of the applicant is greatly appreciated.

Family Name: _____
Address _____
Home Phone _____ Cell Phone _____
e-mail _____
How Long have you attended this fellowship? _____

Pastor/Assistant Pastor: _____

Church Name: _____

Address: _____

Phone# _____ Contact/e-mail _____

How long have you known the applicant? _____

How well are you acquainted with the applicant?

Very Well Fairly Well Casually By Face/Name Not familiar with applicant

Does applicant actively serve at your church? _____

In what ministries? _____

Please rank the following categories by the number you believe best describes the applicant.

	Unobserved	poor	minimal	average	excellent	outstanding
Spiritual Life/Maturity	1	2	3	4	5	6
Ability to communicate	1	2	3	4	5	6
Servants Attitude	1	2	3	4	5	6
Reliability	1	2	3	4	5	6
Teachable Spirit	1	2	3	4	5	6
Submission to authority	1	2	3	4	5	6

Based upon your evaluation, the applicant is:

- Strongly recommended Recommended
 Recommended with reservation Not recommended

We would greatly appreciate any other observations or comments you may have regarding the applicant's family.:
