****Form E: Family Friend, Youth Leader or Pastor Reference**

Thank you for taking the time to complete this reference. It will remain confidential.

**Please forward directly to LCBI High School**

**Attention- Admissions Office**

**by Fax to (306) 867-9947**

**by email to** **admissions@lcbi.sk.ca**

**by mail to** Box 459, Outlook, SK. S0L 2N0

**Name of Student:**

****

**Relationship?** **How long have you known the Student?**

****

**What comments would you make concerning this student's strengths and weaknesses?**

****

**Please describe the student's family make-up?**

****

**Are there family dynamics which affect the student's attitude?**

****

**Has the student had emotional or disciplinary struggles in the past?**

****

**Please indicate your current estimation of this student:**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  | Outstanding | Above Average |  | Average |  | Below Average | Poor |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Academic performance |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Intellectual Curiosity |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Motivation |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Emotional Intelligence |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Cooperativeness |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Integrity |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Dependability |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Consideration for |  |  |  |  |  |  |  |  |  |  |  |
| Others |  |  |  |  |  |  |  |  |  |  |  |
| Positive influence and |  |  |  |  |  |  |  |  |  |  |  |
| potential for leadership |  |  |  |  |  |  |  |  |  |  |  |
| Participation in activities |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Would you recommend this student?** |  |  |  |  |  |  |  |  |  |  |
|  |  |  | **□** |  | **□** |  |  | **□** |  | **□** |  |
|  | Yes, without | Yes, with |  | No, not at all | Please call me |  |
|  |  |  | reservation | reservation |  |  |  |  |  |  |  |  |
| **Name:** |  |  |  |  |  |  |  |  |  |  |  |  |
| **Address:** |  |  |  |  |  |  |  |  |  |  |  |  |
| **Email:** |  |  |  | **Phone:** |  |  |  |  |  |  |



*Signature* *Date*