**Life Center Academy**2045 Columbus Road  
Burlington, NJ 08016  
(609) 499-2100  
(609) 499-4905

**APPLICANT REFERENCE FORM**

**TO BE COMPLETED BY THE APPLICANT:**

Last name First name Middle initial Current Grade

Permanent address:

Telephone number: Mobile number:

Email address:

**I hereby waive my right to review this form:**

**(Signature of applicant)**

It is the applicant’s responsibility to provide a school addressed, stamped envelope to the person completing this form.

**TO BE COMPLETED BY THE STUDENT REFERENCE:**

Note: The above student has applied for admission to Life Center Academy and has chosen you as a reference. Please complete the evaluation as outlined below. If you prefer, you may write a brief statement in lieu of or in addition to completing this form. This form will be held in strict confidence, provided the candidate has signed the above statement waiving his or her right for review. Otherwise, the candidate may review his or her file.

**Acquaintance with Candidate:**

□Teacher □Principal □Pastor

**Evaluation:** (Please review those traits which you feel qualified to evaluate):

***Please answer question in complete sentences.***

1. Listens attentively:
2. Observes rules of school and class:
3. Attitude:
4. Attendance:
5. Responsibility:
6. Works with others:
7. Additional information and/or comments:

Name: Position:

Name of School or Church:

Signature: Date:

Please complete and mail or email as soon as possible to: Admissions

Life Center Academy

2045 Columbus Road

Burlington, NJ 08016

Email: [evelez@lcmail.org](mailto:evelez@lcmail.org) Revised 7/5/2023