



# Kaikohe Christian School

To follow the way of Jesus Christ, seek His Truth and excel in life for Him  
Kí te whái i te ara o Ihu Karaiti, kí te rapu i Tana Pono, kí te hira ora hoki, mo ia

## REFERENCE FORM

### PARENTS TO COMPLETE

Please Note: Two references are required from persons of standing in the community e.g. employer, kaumatua.  
For preference of enrolment a parent/parents of the child must be a regular attender of an approved Christian church. To be considered for preference of enrolment a reference form will need to be completed by your pastor/minister.

This application is for (year) 20 \_\_\_\_\_

Students Full Name \_\_\_\_\_

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Class/Year Level \_\_\_\_\_

Parents Names: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

### REFEREE TO COMPLETE

The parents of the student named above are making an application to enrol the student at Kaikohe Christian School. Would you be so kind as to complete this reference form and email or post it to us as soon as possible, to assist us in the application process. All information will be held in strict confidence to appropriate school admissions personnel only.

1. How long have you known the student and their family?

\_\_\_\_\_

2. In what capacity? E.g. minister, employer \_\_\_\_\_

3. Please comment on the stability and strength of the applicant's home and family.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Please comment on the respect and obedience the student shows to his/her parents

\_\_\_\_\_  
\_\_\_\_\_

5. The school prospectus states that students are to abstain from smoking, drinking alcohol, using illegal drugs or indecent language and profanities, and to strive to be above reproach and avoid all “appearances of evil”.

Please comment on the student’s exposure to any of the above activities, in their home or community

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## 6. Christian Experience

If you are the family’s minister, pastor or church leader or if you know the family well enough, please comment.

- a) Please specify which church they attend and how often

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- b) Comment on the parent’s involvement in other church/Christian Activities

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- c) Does the student attend church regularly with their parents? Please comment on any history of involvement

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7. The school has available to it qualified and experienced pastors and counsellors to assist individuals and their families should the need arise. Are there any areas the school should know about?

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8. Finally, please provide your name and details so that we may contact you should it be necessary to clarify any points of information.

Name \_\_\_\_\_ Occupation \_\_\_\_\_

Church role (if any) \_\_\_\_\_

Contact Telephone (Day) \_\_\_\_\_ (Night) \_\_\_\_\_

Signed \_\_\_\_\_ Date / /

*Please return or email completed forms to the Kaikohe Christian School:*

*Email: [admissions@kcs.school.nz](mailto:admissions@kcs.school.nz)*

*Post: 52 Mangakahia Road  
Kaikohe, 0405*

*Thank you for your assistance*