

# VIRGINIA BEACH FRIENDS SCHOOL

1537 Laskin Road, Virginia Beach, VA 23451  
Telephone: (757) 428-7534 Fax: (757) 428-7511



## PERSONAL REFERENCE (Principal, Employer, Coach, Pastor, etc.)

Date of Application: \_\_\_\_\_ Date of Proposed Entrance: \_\_\_\_\_

Student's Name: \_\_\_\_\_  
Last First Middle

Your Name: \_\_\_\_\_

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

Your relationship to student: \_\_\_\_\_

How long have you known the student: \_\_\_\_\_

Please check the appropriate box for each item below:

	Poor	Fair	Good	Very good	Outstanding	Not applicable
Manners	0	0	0	0	0	0
Dependability	0	0	0	0	0	0
Compatibility with peers	0	0	0	0	0	0
Compatibility with adults	0	0	0	0	0	0
Relative maturity	0	0	0	0	0	0
Common sense	0	0	0	0	0	0
Vitality	0	0	0	0	0	0
Strength of character	0	0	0	0	0	0
Sense of humor	0	0	0	0	0	0
Overall evaluation	0	0	0	0	0	0

Please describe the activity or job in which you have supervised the applicant: \_\_\_\_\_

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

Please comment candidly on the student's

Imagination, originality, creativity, and resourcefulness: \_\_\_\_\_

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

(Please complete reverse side)

Dedication to the activity or job: \_\_\_\_\_

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Sense of service and concern for others: \_\_\_\_\_

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Unusual strengths and/or weaknesses: \_\_\_\_\_

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In what way do you believe the applicant could make a contribution to Virginia Beach Friends School? \_\_\_\_\_

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Remarks: \_\_\_\_\_

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*Thank you for completing this form. Your remarks will have a direct bearing on the student's application and we will consider them carefully.*

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Signature

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Date

