

In God is the Light of Knowledge

PASTOR'S RECOMMENDATION

This recommendation form is to be completed by the pastor of the applicant's parents and returned to the school office:

Name of Parents:
How long have you known the prospective parents, and in what capacity?
Please describe their involvement in your congregation:
Please supply a brief testimonial regarding them:
Pastor's signature: Date:Phone No:

28 Green Ave., Edleen 1619. P O Box 10308, Edleen 1625. Tel. (011)394-0384. Fax (011)975-0152. admin@sonrisecs.co.za