

**Greenbrier Christian Academy**  
311 Kempsville Road, Chesapeake, VA 23320  
Phone: 757-547-9595 Fax: 757-547-9569

**PASTORAL REFERENCE FORM**

School Year: 2026-2027

Family Name: \_\_\_\_\_

*Greenbrier Christian Academy requires families to be in regular church attendance in order to be enrolled in the Academy. Regular attendance means that the family attends at least one regular worship service per week. Thank you for taking the time to complete this form. Please mail or fax directly to the school.*

Describe the family's church attendance:

Every Sunday     3-4 times a month     1-2 times a month     Occasional     Seldom

Church membership:     Both parents     Father     Mother     Neither parent

Is this family active in your church beyond Sunday attendance?    YES    NO

If yes, please explain \_\_\_\_\_

Are the children active in the youth program of the church?    YES    NO

Do you consider the children open to spiritual instruction?    YES    NO

What is your understanding of this family's relationship with God? \_\_\_\_\_

Does this family present a lifestyle that would be a positive testimony for the Lord and Greenbrier Christian Academy?    YES    NO

Please explain any concerns that should be considered relative to the admission of this family to Greenbrier Christian Academy?

Do you recommend the family for admission to Greenbrier Christian Academy?    YES    NO

Church's Name \_\_\_\_\_

Pastor's Name \_\_\_\_\_ Pastoral Position \_\_\_\_\_

Phone \_\_\_\_\_

Pastor's Signature \_\_\_\_\_ Date \_\_\_\_\_

*\*School administration uses this reference for the purpose of making admissions decisions. Information related to church attendance may be shared with families, however all personal comments are confidential and will not be shared.*

**Please email this completed form to:  
Amanda Caldwell ([apcaldwell@gcagators.org](mailto:apcaldwell@gcagators.org))**