

St. Louis Christian College
Soldier Scholarship
Reference Form

Full Name of Applicant: _____

Name of Person Making the Reference: _____

Phone Number: _____ Relationship to Applicant: _____

How long have you known the applicant? _____

Thank you for taking the time to provide this reference for the St. Louis Christian College Soldier Scholarship applicant. Please use your personal knowledge of this applicant to respond to the following questions.

Please rate the applicant on the following by checking the appropriate box:

Attribute	Excellent	Very Good	Good	Average	Unknown
Character and respect for others					
Critical thinking skills					
Ability to set realistic and attainable goals					
Commitment to school and academic ability					
Demonstrated leadership					
Demonstrated service to others					
Community involvement					
Communication Skills					
Church Activity					

Please briefly describe the overall Christian character of the applicant:

Please contact the St. Louis Christian College Admissions Office for any questions at: 1-800-887-7522

Please submit the reference form to:

St. Louis Christian College
Admissions Department
Scholarship Program
1360 Grandview Dr.
Florissant, MO 63033