FAMILY REFERENCE FORM by an Administrator
EL CAMINO ACADEMY
Admissions Department

El CAMINO ACADEMY cordially requests information on the _____ family, who is applying for admission to our school for their child(ren) _____.

1. Parental support of the vision, mission, and norms of the school
   ___ Excellent ___ Satisfactory ___ Needs improvement
   Comments: _____
   _____
2. Parental participation in and commitment to school activities
   ___ Excellent ___ Satisfactory ___ Needs improvement
   Comments: _____
   _____
3. Parental support of and commitment to their children in spiritual, emotional and academic areas
   ___ Excellent ___ Satisfactory ___ Needs improvement
   Comments: _____
   _____
4. Parental punctuality in paying school bills
   ___ Excellent ___ Satisfactory ___ Needs improvement
   Comments: _____
   _____
5. Do they owe anything to the school?
   ___ YES ___ NO
   Comments: _____
   _____
6. Reason for leaving your school:
   ___ Academic ___ Discipline ___ Other
   Please specify: _____
7. Would you accept the student back in your school?
   ___ YES ___ NO
   Why? _____

School's name: _____

Name, signature and title of person who filled out this form:

_____	_____
Name	Signature
_____	_____
Title	Date

Please request your child's present or last school to send this form to the ECA admissions office in a **sealed envelope** or by electronic mail to admissions@eca.edu.co, or to our fax at 676-1339, option 2.

(Revised, November 2010)