



FRIEND'S REFERENCE

Instructions to the Applicant

Complete the portion below then give this form to the person you have chosen as your Friend Reference.

To Be Completed by the Applicant

First name	Last Name	Middle
Address		
Phone	Email	

I request that the following reference be given directly to Lighthouse Bible School and I waive any right to review this information.

Signed	Student	Dated
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Instructions to the Applicant's Friend

Lighthouse Bible School requires a personal recommendation for each applicant. Please answer the questions below carefully and candidly. The information you relate to us will be held in strict confidence. Please return the form to the Lighthouse Bible School registrar's office either by mail or email at the address below. Thank you for your time. Then mail this form directly to Lighthouse Bible School Sonoma, PO Box 1250, Sonoma, CA 95476. Attention: Registrar or email an electronic copy to www.registrar@lighthousebibleschool.

To Be Completed by the Applicant's Friend

Name	Are you a relative?
Address	Phone
Email	

1. Explain how well you know the applicant	2. Would you place full confidence in the applicant's integrity? YES NO	
3. Describe the applicant's personal commitment to Jesus Christ.		
4. Describe the applicant's commitment to and involvement in their local church.		
5. Explain how the applicant's character strengths and weaknesses affect their <i>personal</i> relationships.		
6. To what extent does the applicant smoke, drink alcoholic beverages, or use non-medicinal drugs?		
7. Describe any character or academic weaknesses that may hinder the applicant's success at LBS.		
8. Any additional comments?		
Signed:	Friend	Date