



**Patten Academy of Christian Education**  
**Dr. Bebe Patten, Founder**

2430 Coolidge Avenue • Oakland, CA 94601 • (510) 533-3121 • [www.pattenacademy.org](http://www.pattenacademy.org)

**Student's Statement of Purpose**  
**(6-12<sup>th</sup>)**

The following is a statement of my reason(s) for applying to be a student of the Patten Academy of Christian Education

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\_\_\_\_\_ Date

\_\_\_\_\_ Student's Signature

**Patten Academy Expected School Wide Learning Results**

*Critical Thinkers • Active Learners • Effective Communicators • Committed Christians • Community Contributors • Healthy Individuals*



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Letter of Recommendation I

Applicant's Name \_\_\_\_\_ Date \_\_\_\_\_

School previously attended \_\_\_\_\_ How long? \_\_\_\_\_

Recommender's Name \_\_\_\_\_

Administrator  Counselor  Teacher

1. Based on the applicant's academic record (report cards, transcripts), how well do you think he/she would perform academically at Patten Academy?
 Very well  Average  Below average

2. On the basis of academic potential (opinion and standardized test scores), how well do you think the applicant would perform academically at Patten Academy?
 Very well  Average  Below average

3. On the basis of your observation, does the applicant perform to their academic potential?  Yes  No

Please explain \_\_\_\_\_
\_\_\_\_\_

4. Please list below any (remedial or enriched) academic programs, student is enrolled in:
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

5. On the basis of your observation of the applicant's character, cooperation, behavior and social development, how would you rate his/her potential for success as a student at Patten Academy?
 This individual should be an exemplary student.
 This individual should do reasonably well as a student.
 This individual would probably need disciplining from time to time.
 This individual would probably be a discipline problem.

6. Does the applicant have a psychological or confidential file?  Yes  No

7. On the basis of your observation, the applicant's overall campus behavior is:
 Excellent  Good  Marginal  Poor

8. In your opinion, what are the leadership qualities of the applicant?
 The applicant is accepted by his/her peers as a leader and generally takes control of a situation naturally.
 The applicant is a natural leader but accepts leadership roles reluctantly.
 The applicant is not a leader, but mixes well with other students.
 The applicant is usually a loner.

9. In your opinion, what is the applicant's most outstanding characteristic? \_\_\_\_\_
\_\_\_\_\_

10. In your opinion, what do you perceive to be the applicants greatest challenge? \_\_\_\_\_
\_\_\_\_\_

Patten Academy Expected School Wide Learning Results

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11. On the basis of your observation, is the applicant responsible in his/her care of textbooks and other school-loaned equipment?  Yes  No  No opportunity to observe
12. To the best of your recollection, please list school activities in which the applicant participated (i.e., music, sports, etc.):  
 \_\_\_\_\_  
 \_\_\_\_\_
13. From your experience, has there been parental cooperation and involvement in school activities?  Yes  No  
 In what way(s) \_\_\_\_\_
14. Please estimate the attendance record of the applicant.  
 The applicant is rarely absent from school.  
 The applicant misses about 5%-15% of school.  
 The applicant is out of school on a regular basis (20% to 30% of the time).
15. If possible, give the number of days the student was absent from school for the most recent semester: \_\_\_\_\_
16. What were the majority of these absences the result of?  
 Sickness  Cutting  Family Business  
 Doctor  Vacation  Other. Please explain: \_\_\_\_\_
17. Estimate the number of the applicant's tardies in the most recent semester of attendance. If these figures are unavailable, please estimate as best as possible.  
 0-3 times in all classes  7-15 times in all classes  
 4-6 times in all classes  16 or more times in all classes
18. May we call for further clarification or questions?  Yes  No Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_  
 Ask for: \_\_\_\_\_
19. Please add any comments that would help us get to know the applicant better: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

Thank You

Patten Academy of Christian Education

**PLEASE SEND IT DIRECTLY TO SCHOOL OR IN A SEALED ENVELOPE, THANK YOU.**



## Patten Academy of Christian Education

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### Letter of Recommendation II

Applicant's Name \_\_\_\_\_ Date \_\_\_\_\_

Recommender's Name \_\_\_\_\_

Check only one:  Pastor  Youth Minister  Staff Member: Position \_\_\_\_\_

Church \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

1. Approximately how many services a month does the applicant attend church?  
 0  1-4  4 or more

2. Which service does the applicant most often attend?  
 Sunday morning.  
 Sunday evening.  
 Mid-week.

3. In your opinion, what is the applicant's personal religious experience, as you perceive it?  
 No knowledge of a personal commitment to Christ.  
 Applicant is passively interested in being a Christian.  
 Applicant has a consistent walk with Jesus Christ.  
 Unable to comment.

4. In your opinion, the applicant's character is:  
 Not trustworthy.  
 Generally trustworthy.  
 Very trustworthy.

5. In your opinion, the applicant's character is:  
 Easily influenced.  
 Moderately determined.  
 Forceful and resolute.

6. In your opinion, the applicant's emotional temperament is:  
 Highly emotional and unstable.  
 Somewhat excitable.  
 Usually well-balanced.  
 Exceptionally stable.

7. In your opinion, the applicant's circle of friends causes him/her:  
 To use poor judgment resulting in poor choices  
 To generally be honest and do that which is right.  
 To consistently seek to do good.

8. We would appreciate your comments on how this student would positively impact our school and how we can best meet his/her academic, spiritual and social development needs:

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9. May we contact you by phone for additional information?  Yes  No

Signature \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

Thank You

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