



CHRISTIAN HIGH SCHOOL

Recommendation Request

Administrative Request

Please complete the items below and give the form to your son/daughter's Administrator (principal, vice principal or academic counselor) at his/her current school.

Name of Applicant:	
Applying to Grade:	
Name of School	
Name of Administrator:	

My son/daughter is applying for admission to Valor Christian High School. This form serves as permission to provide Valor with a student recommendation. **Please complete the online recommendation form sent directly to your email inbox and submit to Valor.** I hereby waive all rights to read the confidential recommendation form.

Parent Signature **Date (MM/DD/YY)**

Recommender Instructions

Soon you will be receiving an email from Valor with a recommendation form included. Please evaluate the student named above based on your direct knowledge. Your input on the student's academic performance, character and leadership will help Valor in our admissions process. Your recommendations will be submitted to our secure online server and will be held in strict confidence.

Please keep this form for your records. **Submit only the electronic form that you will receive by email to Valor.** If you have any questions or do not receive an email with the recommendation form within two weeks, please contact Valor at:

admissions@valorchristian.com or call 303.471.3381.



CHRISTIAN HIGH SCHOOL

Recommendation Request

Math Teacher Request

Please complete the items below and give the form to your son/daughter's current Math Teacher at his/her current school.

Name of Applicant:	
Applying to Grade:	
Name of School	
Name of Math Teacher:	

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Parent Signature **Date (MM/DD/YY)**

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CHRISTIAN HIGH SCHOOL

Recommendation Request

English Teacher Request

Please complete the items below and give the form to your son/daughter's current English Teacher at his/her current school.

Name of Applicant:	
Applying to Grade:	
Name of School	
Name of English Teacher:	

My son/daughter is applying for admission to Valor Christian High School. This form serves as permission to provide Valor with a student recommendation. **Please complete the online recommendation form sent directly to your email inbox and submit to Valor.** I hereby waive all rights to read the confidential recommendation form.

Parent Signature **Date (MM/DD/YY)**

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