

## **Letter of Recommendation**

Scholarship applications must include a letter of recommendation from a church leader who can discuss the family's Christian faith and intent to provide a Christian home education.

Name (Print): Sig	nature:			
Date:				
Church Name:				
Church Address:				
Name of Scholarship Applicants:				
If any, what financial support can the church provi	de to support	the home	education of	
this family? \$ If the church will prove	vide financial	support for	this family, a	
check can be sent to the following address with the	e first and las	st name of	the parents on	
the memo line.				
Portals Acade	emy			
5420 County Road	d 8 NW			
Alexandria, MN	56308			
Does your church currently have a co-op or group	of homescho	ooling fami	lies? Yes	No
To your knowledge, do any of them use Portals?	Yes	No	I Don't Know	ı

Please use the following lines to describe the family's Christian faith and their				
involvement in your community:				