



CIT PARENT/GUARDIAN FORM

Applicant's Name: _____

This form should be filled out by a parent or guardian and should accompany the completed application for CIT. We appreciate your fair and honest evaluation of your child. This information will be held in strict confidence.

1. Describe the **spiritual growth** you have witnessed in your child's life over the last few years. _____

2. In what areas of their spiritual growth do they seem to **consistently struggle**? _____

3. Describe how your child **responds to correction**. _____

4. Would you say your child has an **obedient attitude** at home? Yes No

5. Are you concerned about any of the **friends** with whom your child spends their time?
 Yes No If yes, explain. _____

6. How would you rate your child's **level of responsibility**?
1 2 3 4 5 6 7 8 9 10
poor average excellent

7. Describe ways in which your child displays **initiative and dependability** in their responsibilities at home. _____

8. Are there any **ongoing issues** with your child that have not been resolved to your satisfaction?
 Yes No If yes, explain. _____

9. What areas would you like to see strengthened in your child's life as a result of the CIT program? _____

Parent Signature: _____

