

Section A

DIOCESE OF BROKEN BAY
PARISH PRIEST'S REFERENCE FORM FOR
SCHOOL ENROLMENT

THIS PAGE IS TO BE COMPLETED BY PARENTS

Child's Full Name: _____

Address: _____

Home Phone Number: _____

Parish of Residence: _____

Parish where you regularly attend Mass/Church: _____

Father's name: _____ **Religion:** _____

Mother's maiden name: _____ **Religion:** _____

How does the family contribute to parish life?

For example: Acolytes, Altar Server, Readers, Catechists, Planned Giving Programme, Antioch, Youth Group, church Cleaning, Altar Society, Prayer Group, St Vincent de Paul, Choir Musicians, Legion of Mary, Catholic Women's League, Care Group, School Parents & Friends Association, or other.

Please state: _____

What value do you see in Catholic Education?

Signed: _____ **Date:** _____

Section B

CONFIDENTIAL REFERENCE FROM PARISH PRIEST / MINISTER

Please note –

- Families who are members of St Martin de Porres Parish are to leave this section.*
- Families who are members of other Parishes / Church Communities, please ask your Parish Priest or Minister to complete Section B and then forward it to:
St Martin's School, P O Box 100, Frenchs Forest NSW 1640*

TO BE COMPLETED BY PARISH PRIEST / MINISTER

Does this family live in your Parish? _____

Do you know them personally? _____

Do they regularly worship and participate in Parish life? _____

Signed: _____

(Parish Seal)

Parish: _____

TO BE COMPLETED BY THE ENROLMENT COMMITTEE

I recommend this application for enrolment

I give provisional recommendation for this application

I do not recommend this application

Any further comments: _____

Where applicable, this form should accompany the Application for Enrolment Form to the School Office.