



PASTOR'S RECOMMENDATION FORM

Name of Child(ren) and Grade(s) entering _____

Address _____

This is to certify that according to parish records and/or my personal knowledge

Name of Child's Parents

Parish Envelope Number _____

are members of this parish (check only those items which apply to this family).

Registered _____ Practicing _____ Contributing _____

Signed by Pastor _____

Date _____

Additional Comments if Desired _____

FAITH, ACADEMICS, SERVICE | A COMMUNITY OF EXCELLENCE