



STATEMENT OF CATHOLIC PARISH COMMITMENT

This Statement will need to be taken to your **Nominated Parish** for confirmation by your Parish Priest.

The item **Nominated Parish** means the parish where you normally attend Mass, and where you are most confident the Parish Priest will be able to act as referee.

**TO BE COMPLETED BY THE
PARENTS/CAREGIVERS OF THE APPLICANT
PLEASE ATTACH A FAMILY PHOTO TO THIS FORM**

NAME: _____
Student's Name _____ Mother's Name _____

YEAR/CLASS: _____
Father's Name _____

ADDRESS: _____

SUBURB: _____ STATE: _____ POST CODE: _____

PRESENT SCHOOL: _____

Please tick the most appropriate box and supply any additional information which would assist in the selection process.

Attending Parish:

- Our family is **actively involved** in the above parish.
- Our family attends Mass **regularly** in the above parish.
- Our family attends Mass **about once a month** in the above parish.
- Our family attends Mass **less than once a month** in the above parish.
- Our family **does not attend** Mass.
- Other, please give details.
- Our family contributes to the Planned Giving Envelope No. _____

PRIEST DECLARATION

CHILD'S NAME: _____

YEAR APPLYING FOR: _____

To be filled in **only** by the Parish Priest. The information provided by the designated Parish Priest will determine which applicants are successful.

Name of Parish Priest: _____

SECTION 1

- 1. Family is actively involved in the parish.
- 2. Family attends Mass regularly in the parish.
- 3. Family attends Mass about once a month in the parish.
- 4. Family attends Mass less than once a month in the parish.
- 5. Family does not attend Mass.
- 6. Family gives financial support to the parish.

SECTION 2

From your information, could you make the following recommendation:

- 1. **Highest Recommendation:**
-regular church attendance - active involvement with parish
-contribution to planned giving
- 2. **Strong Recommendation:**
-regular church attendance - active involvement with parish OR
-contribution to planned giving
- 3. **Recommended:**
-regular church attendance - completed sacramental program.
- 4. **Satisfactory:**
-irregular church attendance (i.e. once a month) - sacramental program incomplete.
- 5. Do Not Recommend:

Other comments:

Parish Stamp.

Parish Priest _____

Date: _____

***THIS DECLARATION TO BE FORWARDED DIRECTLY TO
ST FRANCIS CATHOLIC COLLEGE
Email: enrolments_sfcc@dow.catholic.edu.au***