

# Pastoral Reference Form for the Catholic Educator



NOTE: Please complete the **candidate portion** of this form and submit it with your application. Those who attend a church can ask their parish leader to complete the **bottom portion** and return it to us at a later date. **When submitting this to your parish leader, please include a photo of yourself to help facilitate the process.**



- Candidate for a teaching position with a Catholic school district
- Candidate for a Leadership position with a Catholic school district

---

## To be completed by the Candidate

Candidate Name (Print): \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_

1. Parish: \_\_\_\_\_ Parish Priest: \_\_\_\_\_

Registered Member:  Yes For how long: \_\_\_\_\_

Parish Activities (Last 5 Years):  
\_\_\_\_\_

2. Previous Parish: \_\_\_\_\_ Parish Priest: \_\_\_\_\_ For how long: \_\_\_\_\_

Parish Activities:

3. Why do you want to teach/lead in a Catholic school?

4. How will you be a role model of Christian witness to students in a Catholic school? Explain:

Candidate Signature: \_\_\_\_\_ Date: \_\_\_\_\_

---

## to be completed by the Parish Priest (Candidates: Please submit a photo as indicated in the note above.)

Parish Priest (Print): \_\_\_\_\_ Parish: \_\_\_\_\_ Phone: \_\_\_\_\_

I know this candidate:  very well  limited  new parishioner

This candidate:

- Is a registered member of the parish:  Yes  No
- Is involved in church ministries:  Yes  No
- Attends mass regularly:  Yes  No

Comments:

Parish Priest Signature: \_\_\_\_\_ Date: \_\_\_\_\_

---

Signature of Parish Priest, Church Seal and mail to: Deputy Superintendent of Schools  
Holy Spirit Roman Catholic Separate School Division  
620 – 12B Street North Lethbridge, AB T1H 2L7

Candidate Portion