

Dear Parents,

## PARISH PRIEST REFERENCE

for families seeking enrolment at Liwara Catholic School

|  | n and take this form to your Parish Priest with the request to complete it and send it back   |
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| as soon as possible to                                     | The Principal   |
|  | Mrs Andrea Millar   |
|  | Liwara Catholic Primary School  |
|  | PO Box 63 Greenwood WA 6024   |
|  | Ph: 9448 3811 Fax: 9448 8256  |
| Name of Student:   |   |
| Address:   |   |
| Phone Number:  | D O B:  |
| Name of Mother:  | Name of Father:   |
| Parish:  | Parish Priest:  |
| I currently am/would like to<br>Please tick the following: | <ul> <li>be involved in Parish activities.</li> <li>Parish Council</li> <li>Reader</li> <li>Children's Liturgy</li> <li>St Vincent de Paul</li> <li>Cleaning</li> </ul> |
| Dear Parish Priest,  | Other   |
| Please complete the inform                                 | ation below in reference to the family information above.   |
| 1. How long have you                                       | known this family?  |
| <ol><li>Does the family pa<br/>Sacraments? YES/N</li></ol> | rticipate regularly in the practice of the Catholic Faith i.e. participation in Mass and the IO/UNCERTAIN   |
| •  | ge of the family what kind of influence would you consider the family would have on the ommunity? POSITIVE/NEGATIVE/UNCERTAIN   |
| 4. Are there any pasto                                     | oral circumstances you consider need to be taken into account in the decision about this our School?  |

5. Do you believe that parental attitudes towards the values, beliefs and practices of the Catholic Faith are such that the school and home would be able to work together successfully in areas in Faith Education.

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