



Confidential Parish Reference Form

The family listed below have applied for their child to attend Newman College. Could you please complete the section of the form pertaining to the Parish Priest and return directly to:

The Registrar, Newman College, PO Box 2004 Churchlands 6018, email to registrar@newman.wa.edu.au

Thank you for your time.

This reference will be treated confidentially.

Please adhere a photo of your child

This photo will be used by the Priest as a way of recognising your child

SACRAMENTAL DETAILS

Please adhere a photo of your family

This photo will be used by the Priest as a way of recognising your family

NAME OF ENROLLING STUDENT					
Address					
Current Primary School					
Current Year Level					
Name of Mother/Guardian					
Name of Father/Guardian					
Parish Priest	Parish				

Sacrament Parish Date Received Baptism Reconciliation Eucharist Confirmation

FAMILY PARISH INVOLVEMENT

Please tick the box that most accurately describes your family's attendance at Mass.

WEEKLY	MONTHLY	OCCASIONALLY	CHRISTMAS and/or EASTER ONLY
			EASTEN UNLT
Reading at N		Music, Membership of Paris	or example: Planned Giving Program, h Committees, Youth Groups, Church
1			
2			
3.			
4			
THIS SE	CTION IS TO BE (COMPLETED BY 1	THE PARISH PRIEST
☐ Yes			ing Catholic family with strong
Yes	demonstrable links to Application based on	the Parish "special pastoral circuit	mstances"
Yes	l do not ournout this o	nulication	
□ No	I do not support this a	pplication	
——————————————————————————————————————	est Comment (optional)		
Recomme	ndation made by:		
Name		/	
Position			PARISH STAMP
Signature _.			
Date			