



St. Elizabeth Catholic School

Accredited by Middle States Association of Colleges and Schools

PASTORAL RECOMMENDATION FORM

Section 1: TO BE COMPLETED BY PARENT/GUARDIAN

<i>Name of Child</i>	<i>Grade</i>	<i>Returning</i>	<i>New</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Parents/Guardians

Telephone No.

Home Address:

Parish:

Envelope #:

Please list your Parish volunteer activities:

Section 2: TO BE COMPLETED BY PASTOR

This is to certify that according to parish records and/or my personal knowledge, the above referenced family is a registered and participating member of our parish and is eligible for the Catholic tuition rate.

Pastor's Signature

Date

Parish Seal

Please have this form signed by your Pastor and include it in your application file in order to receive the Catholic tuition rate.