



PRIEST REFERENCE FORM

Candidate's Name: _____ Date: _____

Please have the priest where you practice your faith complete this form.

1. I know this candidate:
 - very well fairly well only slightly not at all
2. This candidate is registered in my parish. Yes No
3. To my knowledge, this candidate attends Mass regularly. Yes No
4. This candidate has accepted an active role in a Catholic organization or one of the ministries of the church. Yes No

If yes, please indicate which roles:

- | | |
|---|--|
| <input type="checkbox"/> Church Choir | <input type="checkbox"/> RCIA/RCIC leader |
| <input type="checkbox"/> Lay leader | <input type="checkbox"/> CWL executive |
| <input type="checkbox"/> Minister of the Eucharist | <input type="checkbox"/> CWL member |
| <input type="checkbox"/> Marriage preparation leader | <input type="checkbox"/> Knights of Columbus executive |
| <input type="checkbox"/> Parish committees | <input type="checkbox"/> Knights of Columbus member |
| <input type="checkbox"/> Other (please specify) _____ | |

5. Please provide any additional comments about this candidate that might be relevant.

Thank you for your assistance.

Priest's Name: _____ Address: _____

Parish: _____

Signature: _____ Telephone: _____