

Diocese of Arlington "Encourage and Teach with Patience"

High School Head of School Pastor (Clergy) Reference Form

	Name of Applicant:	
	Address:	
	Position applying for:	
	Name of Reference:	
	Title:	
	Address	
	Phone	
	I waive my option to view this recommendation.	
	I retain my right to view this recommendation.	
	Applicant's Signature	
	e applicant named above is applying for a position in a Catholic school. owing questions to the best of your ability.	Please answer th
1.	How long have you known the applicant and in what pastoral relationship?	
2a.	Church and a witness to Catholic values and beliefs? Yes No	
2b.	\	d member of
	(For non-Catholic applicants) To your knowledge is the applicant able and witeachings of the Catholic Church? Yes No	
3	The Witness Statement for those who serve in Catholic education states: "All	who sarva in

Catholic Education in the school programs of the Diocese of Arlington will witness by their public behavior, actions and words a life consistent with the teachings of the Church."

Is there any reason you a Witness Statement?	re aware of why the candidate	e would not	be able to abide by	this
Please check the appropriate	e answers:			
Registered in your	r parish:	Yes	No 🗌	
Attends Sunday M	lass:	Yes 🗌	No 🗌	
Marriage (if appli	cable) is valid in the Church:	Yes 🗌	No 🗌	
	n that this person could not as Yes			
Pastor's Signature:				
Title:				
Parish:				
Date:				
Please return this form to:	Office of Catholic Schools 200 North Glebe Road, Suite Arlington, VA 22203	503		