

Diocese of Arlington "Encourage and Teach with Patience"

Administrator 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	
	applicant named above is applying for a position in a Catholic school. owing questions to the best of your ability.	Please answer the
1.	How long have you known the applicant and in what pastoral relationship?	
2a.	(For Catholic applicants) To your knowledge is the applicant a committed me Church and a witness to Catholic values and beliefs? Yes No or	
2b.	(For non-Catholic applicants) To your knowledge is the applicant a committee	d member of
	(For non-Catholic applicants) To your knowledge is the applicant able and witeachings of the Catholic Church? Yes No	~ ·
	The Witness Statement for those who serve in Catholic education states: "All Catholic Education in the school programs of the Diocese of Arlington will wit	

public behavior, actions and words a life consistent with the teachings of the Church."

Is there any reason you are aware of why the candidate would not be able to abide by this Witness Statement?					
Please check the appropriat	e answers:				
Registered in you		Yes 🗌	No 🗌		
Attends Sunday 1	Mass:	Yes 🗌	No 🗌		
Marriage (if app	licable) is valid in the Church:	Yes 🗌	No 🗌		
Are you aware of any reason the Diocese of Arlington?	on that this person could not as Yes No (If yes,	ssume a lead please prov	dership role in ide an explana	a Catholic schoo	
Title:					
Parish:					
Date:					
Please return this form to:	Diocese of Arlington Office of Catholic Schools 200 North Glebe Road, Suite	e 503			

Arlington, VA 22203