



# CATHOLIC INDEPENDENT SCHOOLS KAMLOOPS DIOCESE

OFFICE OF THE SUPERINTENDENT  
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## CONFIDENTIAL CATHOLIC PASTORAL REFERENCE FORM

### To be completed by the applicant/employee:

APPLICANT/EMPLOYEE NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS: \_\_\_\_\_ Phone #: \_\_\_\_\_

NAME of CATHOLIC PARISH \_\_\_\_\_ PRIEST: \_\_\_\_\_

**Position:** ☐ Teacher On Call ☐ Teacher ☐ Vice Principal ☐ Principal ☐ Superintendent  
☐ Education Assistant ☐ Office Support ☐ Update ☐ Other: \_\_\_\_\_

**School:** ☐ St. Ann's, Quesnel ☐ Sacred Heart, Williams Lake ☐ OLPH, Kamloops  
☐ St. James, Vernon ☐ ASCEND Online ☐ St. Ann's Academy, Kamloops

- Are you a registered member of this parish? ☐ Yes ☐ No
- Do you usually attend Mass every Sunday? ☐ Yes ☐ No
- Do you take an active role in any of the parish ministries or organizations? ☐ Yes ☐ No

- If not registered in this parish for the last two years, please name your previous parish and pastor:

Parish Name & Locale: \_\_\_\_\_

Pastor: \_\_\_\_\_

- Are you: ☐ Single ☐ Married in Catholic Church ☐ Married in Other Church ☐ Married Civilly ☐ Divorced ☐ Common Law

Applicant/Employee Signature \_\_\_\_\_

Date of Signature \_\_\_\_\_

### To be completed by the Parish Priest:

- How well do you know this applicant/employee? ☐ Very Well ☐ Well ☐ By Name ☐ By Face ☐ Just Met

- How long have you known this person? \_\_\_\_\_

- Is this person a registered member of your parish? ☐ Yes ☐ No

Comment: \_\_\_\_\_

- Do you know this person to be a regularly practicing Catholic? ☐ Yes ☐ No

Comment: \_\_\_\_\_

- Do you know of anything in the marriage or lifestyle of this person that would put into question his/her suitability to teach or serve in a Catholic school? ☐ Yes ☐ No

Comment: \_\_\_\_\_

- Do you recommend the applicant as a suitable candidate for Catholic schools of this Diocese? ☐ Yes ☐ Provisionally (up to 1yr) ☐ No

Comment: \_\_\_\_\_

- Would you like the Superintendent of Schools to contact you so you can provide additional information and/or clarification? ☐ Yes ☐ No

Pastor Signature \_\_\_\_\_

Date of Signature \_\_\_\_\_

If the signature is not that of the territorial pastor, what is the reason? \_\_\_\_\_

PLEASE DO NOT COPY or share with others. EMAIL DIRECTLY TO THE ABOVE ADDRESS. THANK YOU!