

# St Benedict's School

**Applecross Parish Contact Details:**

9364 1120, 115 Ardross Street, Ardross 6153



## PARISH PRIEST INTRODUCTION FORM

*Appt Date / Time:*

### Section 1

*Section 1 is to be completed by the parents and the form then given to the Parish Priest who will complete his section and return it directly to the school.*

**Student Surname:**

**Student Names:**

**Calendar Year of Entry (e.g. 2020)**

**Academic year of entry:** 3K, 4K, PP, Yr1, Yr2, Yr3, Yr4, Yr5, Yr6

**Birth Date:**     /     /     **Current Age:**

**Male**      **Female**

**Home Street Address:**

**Home Phone Number:**

**Suburb:**

**State:**     **Post Code:**

**Religious Denomination:**

**Parish Priest / Minister Name:**

**Current Parish/Church:**

**Sacrament Dates:**     **Baptism:**

**Reconciliation:**     **First Holy Communion:**

**Confirmation:**

**Mother / Female Guardian: Title:**

**Surname:**

**First Name:**

**Email Address:**

**Mob No:**

**Religious Denomination:**

**Current Parish / Church**

**Suburb:**

**Parish Priest:**

**Father / Male Guardian: Title:**

**Surname:**

**First Name:**

**Email Address:**

**Mob No:**

**Religious Denomination:**

**Current Parish / Church:**

**Suburb:**

**Parish Priest:**

### Section 2

*The Parish Priest will complete this section and forward the completed form onto the School.*

1. *How long have you known the family?*
2. *Is the family actively involved in the life of the church?*
3. *What do you think is the reason that the parents wish their child to attend St Benedict's School?*
4. *Are there any pastoral circumstances you consider need to be taken into account in the decision about this student's enrolment at our school?*
5. *Is there sufficient faith life and atmosphere in the home for the school to build upon?*
6. *Any other comments.*

**Priest's Signature:**

**Priest' Name:**

**Parish:**

**Suburb:**

**Date:**