

PASTOR/FAITH LEADER'S RECOMMENDATION

If you are unable to get a pastor/faith leader's recommendation completed, a letter of reference (from a coach, Principal, etc.) can be submitted instead of this form.

TO BE COMPLETED BY PARENT/CAREGIVER

Parent/Caregiver Name:	
Daughter's Name:	Applying for Grade:
Daughter's Religion:	Daughter's Parish/Church:
Pastor/Faith Leader:	
What religious instructions has your daughter rec	reived?
Religious affiliated schools your daughter has atte	nded:
School:	Grades:
School:	Grades:
Indicate which sacraments your daughter has rece	vived (if appropriate to your religion)
Baptism Eucharist	Reconciliation Confirmation
Recent family involvement in Church activities at	nd organizations. (Use reverse if more space is needed)
·	
TO BE COMPLETED BY PASTOR/FAITH	LEADER
Do you know this family personally?	Yes No How long?
Do you know the student applicant personally?	Yes No How long?
Comments:	
	Parish/Congregation:
Signature:	Date:
Forward directly to: Admissions Office, St. Mary	r's Academy, 550 Wellington Crescent, Winnipeg, MB R3M 0C1
Fax: 204-453-2417	E-Mail: admissions@smamb.ca

APPLICATION DEADLINE FEBRUARY 1, 2024