



**Diocese of Providence**

**Catholic School Office**

One Cathedral Square

Providence, RI 02903

**Tel: 401- 278-4550 • Fax: 278-4596**

**Certificate of Parish Registration**

Name \_\_\_\_\_

The person whose name appears above is seeking a position in the Catholic schools of the Diocese and must certify his or her standing with the Church as a condition of employment.

To the best of my knowledge this person (check all that apply):

\_\_\_\_\_ Is a baptized Catholic and registered member of this parish.

\_\_\_\_\_ Regularly attends Mass on Sundays and receives the sacraments of the Church regularly.

\_\_\_\_\_ If married, was married according to the laws of the Catholic Church.

\_\_\_\_\_ I cannot certify this person's standing with the parish or Church.

Additional comments:

\_\_\_\_\_

Pastor's Signature \_\_\_\_\_

Date \_\_\_\_\_

Parish \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

(Please place official church seal)