

**DIRECTIONS FOR PARENTS:** Please fill out Section 1 and 2, then deliver these forms to your student's current school, church or place of worship. Once the pastor or minister completes Section 3, return completed forms to the office at Pope John Paul II High School, or email to [admissions@popejp2hseagles.org](mailto:admissions@popejp2hseagles.org).

**DIRECTIONS FOR PASTOR or MINISTER:** Complete Section 3. The student named below has applied for admissions to Pope John Paul II High School. We appreciate your assistance and request your recommendation at your earliest convenience.

**SECTION 1: Student Information (please print)**

Student Name (PRINT) \_\_\_\_\_ Student's School \_\_\_\_\_  
*Last Name First Name*

**SECTION 2: Parent Authorization**

I hereby authorize my child's pastor/minister to prepare and submit the written recommendation required by Pope John Paul II High School as indicated in the admissions process. I understand that this written evaluation is confidential and may not be reviewed by the applicant or the applicant's parent or guardian. The evaluation will be used only in the admissions process and will not become part of the student's permanent record.

Parent Name (PRINT) \_\_\_\_\_ Parent SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**SECTION 3: Pastor / Minister Information and Recommendation (please print)**

As a faith-based school, we are looking for students who are active in their faith community. We would welcome your recommendation and any comments about this student with respect to their involvement in your community.

- I recommend
- I recommend with concerns
- I do not recommend

Additional comments:

Name of Church or Faith Community (PRINT) \_\_\_\_\_

Pastor/Minister Name (PRINT) \_\_\_\_\_ Pastor/Minister SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_