



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 registered member of this parish.
- _____ Has received the sacraments of Baptism and Confirmation in the Catholic Church.
- _____ Regularly attends Mass on Sundays and Holy Days of Obligation.
- _____ 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)