



# Church Representative/ Religious or Clergy Report

Form to be completed by a nominated Referee

Thank you for agreeing to act as a referee for:

**Applicant Name:**

**Current Position:**

**Position Applied For:**

**Location:**

Your input from the perspective of the Church, is a significant consideration for leadership positions in Catholic Education.

**Referee Name:**

**Current Position:**

**Phone:**

**Email:**

**Number of years known applicant:**

**In what capacity do you know the applicant:**

**What knowledge do you have of the applicant's spiritual life and religious practice?**

**Religious Leadership - Applicants' capacity to ensure the primary faith formation of students in an authentic Catholic community**

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## General Character Assessment:

## Readiness for the Position:

Please comment on the applicant's readiness for the position

## Recommendation

Please Select:

I recommend the applicant for this position

I **DO NOT** recommend the applicant for this position

*If submitting electronically, typing your name below denotes supplying your signature*

**Signature:**

**Date:**

**Return Form To:** The Principal  
Ms Erica Prosser  
Ph: (07) 4053 4550  
Email: [principal.holyspirit@cns.catholic.edu.au](mailto:principal.holyspirit@cns.catholic.edu.au)

**Due Date:**