

## ARCHDIOCESE OF HARTFORD OFFICE OF EDUCATION, EVANGELIZATION AND CATECHESIS (OEEC)

467 Bloomfield Avenue Bloomfield, CT 06002-2999

## **PASTOR'S APPROVAL FORM**

To: The Reverend Pastor

The person named below is provide a brief statement of Catholic faith.		-	_		-
	(Applicant's Name)  (Applicant's Address)				
(Date)		-	(Pastor's S	Signature)	
(Parish)		. <u>-</u>	(Street Ac	Idress)	
(Telephone Number)			(Town)		
Please return this form to:	Name of Hig	nh School: _ Address: _			