



**Holy Spirit School**  
**1050 North Texas, Fairfield, CA 94533**  
**(707) 422-5016 Fax (707) 422-0874**  
**[www.holyspiritschoolfairfield.org](http://www.holyspiritschoolfairfield.org)**

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**Letter of Recommendation from your Parish**  
(Bring this form to your parish office)

Name of Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Name of Parish: \_\_\_\_\_

Address: \_\_\_\_\_

**This part to be completed by Pastor or Parish Representative**

Date Registered in Parish: \_\_\_\_\_

Contributing: \_\_\_\_\_ Yes \_\_\_\_\_ No

Parish Involvement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Completed by: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_