



ST. ISIDORE CATHOLIC CHURCH

222 Clark Ave. Yuba City, CA 95991 | Office: (530) 673-1573 | Fax: (530) 673-2512 | faithformation@stisidore-yubacity.org

CONFIRMATION SPONSOR APPLICATION

You have been asked to be a sponsor for the Sacrament of Confirmation. A sponsor must be:

1. a practicing Catholic in good standing (see below)
2. at least 16 years of age
3. Baptized, received 1st Communion and Confirmed
4. spiritually mature, be interested in the candidate and his/her spiritual growth, be living a life of example for the candidate, and always pray for the candidate.

Please provide the following information.

CONFIRMATION CANDIDATE'S NAME: _____

Your Name: _____ Phone: _____

Address: _____
Street or PO Box

_____ Email: _____
City, State Zip

FOR OFFICE USE ONLY	
Reviewed by:	_____
Date:	_____
<input type="checkbox"/> CONF. CAN	
<input type="checkbox"/> RCIA (CAN)	
<input type="checkbox"/> RCIA (CAT)	
<input type="checkbox"/> ACCEPTED	
<input type="checkbox"/> DENIED	_____

1. Which have you received? (Check all that apply.)

<input type="checkbox"/> a. baptized in the Catholic Church	<input type="checkbox"/> c. Confirmed in the Catholic Church
<input type="checkbox"/> b. received 1 st Communion in the Catholic Church	

2. Are you a Catholic in *Good Standing* (attending Sunday Mass and days of obligation, and receiving Communion & reconciliation regularly)? Yes _____ No _____

3. What is your status?

<input type="checkbox"/> a. Single	<input type="checkbox"/> c. Married civilly
<input type="checkbox"/> b. Single and living with a partner	<input type="checkbox"/> d. Married by the Catholic Church

(If married, you need to bring in a copy of marriage certificate with this application.)

4. Your Relationship to the candidate: (cannot be a parent) _____

5. Have you had an active role in the candidate's faith development before this? Yes _____ No _____

6. Will you work with the candidate on a service project that (s)he chooses? Yes _____ No _____

7. Your current Catholic Parish of **active** participation and its location: _____

FOR USE BY THE PARISH OF THE SPONSOR

Is a Registered Parishioner? Yes _____ No _____

Has completed Sponsor classes? Yes _____ No _____ Date: _____

Has permission to be a Sponsor outside of this Parish: Yes _____ No _____

To the best of my knowledge this person is able to fulfill the responsibilities involved in sponsoring the Catholic initiation of another.

Yes _____ No _____ Other: _____

Parish: _____ Date: _____

Signature: _____

