

Confirmation Candidate Information Form (CCIF)

Candidate Information

Candidate's Full Name (this is the name that will show up on your Confirmation Certificate):

First name _____

Middle name _____

Last name _____

School Attending _____ Grad Year _____

Father's Name _____

Mother's Name _____ Maiden Name _____

Candidate's Confirmation (Saint) Name _____

I grant permission for the above named to receive the Sacrament of Confirmation (Signature(s) of all who share custody of this child):

1. _____ 2. _____

Baptismal Information

Church of baptism _____

Address _____

City _____

State _____

Zip _____

Date of Baptism ____ / ____ / ____
Month Day Year

Baptized by: _____

*** Please include a copy of Baptismal certificate if not baptized at St. Andrew***

First Communion Information

Church sacrament was received (include name, city, and state) _____

City _____ State _____ Date of sacrament _____

Confirmation Sponsor's Information

Sponsor's Name _____

Sponsor's Address _____

City _____

State _____

Zip _____

Sponsor's Parish _____

City _____

State _____

Zip _____