



**OUR LADY OF GRACE RELIGIOUS EDUCATION**  
**THE SACRAMENT OF CONFIRMATION**  
**FILING FORM**

STUDENT'S NAME: \_\_\_\_\_  
*Last Middle First*

FATHER'S NAME: \_\_\_\_\_  
*Last Middle First*

MOTHER'S NAME: \_\_\_\_\_  
*Maiden Middle First*

STUDENT DATE OF BIRTH: \_\_\_/\_\_\_/\_\_\_ EXPECTED CONFIRMATION YEAR: \_\_\_\_\_

**BAPTISM**

DATE OF BAPTISM: \_\_\_/\_\_\_/\_\_\_ CHURCH WHERE BAPTIZED: \_\_\_\_\_

CHURCH ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_ ZIP: \_\_\_\_\_ PHONE: (\_\_\_) \_\_\_\_\_

**PLEASE ATTACH COPY OF BAPTISMAL CERTIFICATE**

**FIRST EUCHARIST**

CHURCH WHERE RECEIVED *(If different than Church where Baptized)*: \_\_\_\_\_

CHURCH ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_ ZIP: \_\_\_\_\_ PHONE: (\_\_\_) \_\_\_\_\_

**FIRST RECONCILIATION**

CHURCH WHERE RECEIVED *(If different than Church where Baptized)*: \_\_\_\_\_

CHURCH ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_ ZIP: \_\_\_\_\_ PHONE: (\_\_\_) \_\_\_\_\_

**CONFIRMATION SPONSOR**

SPONSOR NAME: \_\_\_\_\_ HOME PARISH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_ ZIP: \_\_\_\_\_ PHONE: (\_\_\_) \_\_\_\_\_

**PLEASE ATTACH SPONSOR CERTIFICATE IF SPONSOR IS FROM ANOTHER PARISH**

**CONFIRMATION SAINT NAME** *Can be filled in at a later date if unknown*

SAINT NAME: \_\_\_\_\_