APPENDIX TWO
Confirmation Sponsor Eligibility Form

CONFIRMATION SPONSOR/GODPARENT TESTIMONY FORM
DIOCESE OF RALEIGH

I, ____________________________, a practicing member of ____________________________,
(NAME OF SPONSOR/GODPARENT) (NAME OF PARISH)
presently of ____________________________, ____________________________
(SPONSOR’S STREET ADDRESS) (CITY, STATE ZIP)
testify by my answers and signature below that I am qualified to serve as a Confirmation
sponsor/godparent in the Catholic Church for ____________________________
(NAME OF CONFIRMATION CANDIDATE)

Please circle either YES or NO for each statement below.

YES NO I am a Roman Catholic.
YES NO I am at least 16 years old.
YES NO I have received Confirmation and Holy Eucharist in the Catholic Church.
YES NO I am free to receive Holy Communion when I come to Mass.
YES NO I am someone other than a parent of this candidate.

Answer the following ONLY if married:

YES NO Was your present marriage celebrated in the presence of a Catholic bishop, priest or deacon or if
celebrated outside a Catholic Church was done so with the written permission of a Catholic
bishop? (If not, please provide a written explanation.)

Answer the following ONLY if unmarried:

YES NO Are you living with another person in a romantic relationship or as a couple?

I sign this document in the presence of a Catholic priest or deacon or a representative of the pastor of a Catholic
Church and understand that by my signature that what I have answered above is truthful.

Sponsor/Godparent Signature
Church Representative Signature
Church Representative Title
Church Representative Parish
Church City/State
Date

PARISH SEAL