



FARNOST' SVĀTÝCH CYRILA A METODA  
**SS. CYRIL & METHODIUS SLOVAK  
CATHOLIC CHURCH**

**CONFIRMATION MENTOR/SPONSOR ELIGIBILITY**

**MEANING AND ROLE OF MENTOR/SPONSOR:**

You have a privilege to be a mentor/sponsor for the Sacrament of Confirmation. In accepting this very important role, you need to know the expectations of accepting this commitment. Please read and then sign the statement of eligibility. Please, have your parish sign and seal the letter.

**\*\*PLEASE NOTE: A PARENT CANNOT SERVE AS A MENTOR/SPONSOR\*\***

**REQUIREMENTS FOR A MENTOR/SPONSOR:**

- I am at least sixteen years of age or older.
- I have received the three Sacraments of Initiation of the Roman Catholic Church:
  1. **Baptism** – *Date and church where baptized:* \_\_\_\_\_
  2. **Confirmation** – *Date and church where confirmed:* \_\_\_\_\_
- If married, I have been validly married in the Catholic Church.  
*Date and church of marriage:* \_\_\_\_\_  
If single, I am NOT cohabitating with a member of the opposite sex.
- I participate regularly in Sunday Mass and receive Holy Communion worthily. I go to Confession frequently, more than just once a year. I am giving a witness to my faith in Jesus Christ in word and deed and strive to live the Gospel message in my every day life.
- I am a registered member of \_\_\_\_\_ Parish since \_\_\_\_/\_\_\_\_/\_\_\_\_ and fulfill my obligations to the parish to the best of my ability.
- I promise to give support to \_\_\_\_\_ (candidate's name) by my prayers, by my continued interest in his/her Catholic growth, and by Christian example of my daily life.
- I promise to give support as the MENTOR / SPONSOR. (please circle one)

**\*\*Remember to take an interest in the gifts God has given to your candidate and help him/her to use them\*\***

**MENTOR/SPONSOR AGREEMENT:**

I hereby solemnly declare that I do fulfill all the requirements of a Sponsor for the Sacrament of Confirmation.

Mentor/Sponsor name (please PRINT): \_\_\_\_\_

Mentor/Sponsor's Address and Phone: \_\_\_\_\_

Mentor/Sponsor's Email Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

*(This part is to be filled out by the Church of requesting mentor/sponsor)*

This certifies that the above named person is known to me as a parishioner in good standing. I testify that he/she is qualified to serve as a mentor/sponsor for the Sacrament of Confirmation.

Stamp  
Parish Seal  
Here

Church of Mentor/Sponsor: \_\_\_\_\_

Church's Street: \_\_\_\_\_

Church's City, State, and Zip: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_

Pastor's Signature: \_\_\_\_\_

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