

Saint Bernard's Parish
Religious Education Confirmation Program
415 Tower Hill Road, North Kingstown, RI 02852
(401) 295-0387 Fax (401) 295-1713

Confirmation

Candidates Name: _____ **Date:** _____

Please make it legible (typed is preferred).

Dear Bishop Gelineau,

(1st Paragraph)

Who you are:

- where you go to school
- some outside activity you enjoy

(2nd Paragraph)

Why do you want to be confirmed?

(3rd Paragraph)

What have you done to prepare for confirmation:

- CCD Classes attended.
- Worked with sponsor.
- Attended Mass.
- Other sacraments received.

(4th Paragraph)

What service projects have you performed:

- What did learn from them?

(5th Paragraph)

Conclusion:

- Looking forward to seeing, celebrating with you, all the best

Sincerely,
Your signature