

**CONFIRMATION APPLICATION FORM - YOUTH**

|  |  |
| --- | --- |
| **YEAR:** |  |

**PARTICULARS OF CANDIDATE**

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| Identity/Passport No: |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| --- | --- |
| Church Membership No: |  |

|  |  |
| --- | --- |
| Surname: |  |

|  |  |
| --- | --- |
| First Names: |  |

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| Gender: | Male |  |  | Female |  | Date of Birth: | d | d | / | m | m | / | Y | Y | Y | Y |
| Cell No: |  |  | Email: |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Baptised? | Yes |  |  | No |  | Date of Baptism: | d | d | / | m | m | / | Y | Y | Y | Y |

|  |  |
| --- | --- |
| Church where baptised: |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signature: |  |  | Date: |  |

**PARTICULARS OF FATHER**

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| Identity/Passport No: |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| --- | --- |
| Church Membership No: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Surname: |  | First Names: |  |

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| --- | --- |
| Residential Address: |  |

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| --- | --- | --- | --- | --- |
| Mobile No: |  |  | Email: |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Are you baptised? | Yes |  |  | No |  |  | Are you confirmed? | Yes |  |  | No |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signature: |  |  | Date: |  |

**PARTICULARS OF MOTHER**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Identity/Passport No: |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| Church Membership No: |  |

|  |  |
| --- | --- |
| Surname: |  |

|  |  |
| --- | --- |
| First Names: |  |

|  |  |
| --- | --- |
| Residential Address: |  |

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| --- | --- | --- | --- | --- |
| Mobile No: |  |  | Email: |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Are you baptised? | Yes |  |  | No |  |  | Are you confirmed? | Yes |  |  | No |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signature: |  |  | Date: |  |

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| Required Documentations: |
|  | Submitted |
| Certified copy of Unabridged Birth Certificate |  |
| Copy of Baptism Certificate |  |

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| --- |
| FOR OFFICE USE ONLY |

|  |  |  |  |
| --- | --- | --- | --- |
| Date of application submission: |  | Commencement of Classes: |  |

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| --- | --- | --- | --- | --- |
| Facilitator Name: |  |  | Date of Service: |  |

Rector’s Confirmation Authorisation:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Name |  | Signature |  | Date |