



**SAINT JOHN THE BAPTIST/SACRED HEART CHURCH
OCIA SPONSOR FORM 2024-2025
(Please print.)**

NAME: _____
(LAST) (FIRST) (MIDDLE)

ADDRESS: _____
(STREET)

(CITY) (STATE) (ZIP)

PHONES: _____
(HOME) (WORK) (CELL)

EMAIL: _____ **DATE OF BIRTH:** _____

OCCUPATION: _____ **PLACE OF EMPLOYMENT:** _____

ARE YOU A PRACTICING CATHOLIC? _____ **NAME OF YOUR PARISH:** _____

ADDRESS: _____

NAME OF PRECEDING PASTOR: _____

SACRAMENTS

BAPTISM: _____
(NAME OF CHURCH) (CITY, STATE) (DATE OR YEAR)

EUCCHARIST: _____
(NAME OF CHURCH) (CITY, STATE) (DATE OR YEAR)

CONFIRMATION: _____
(NAME OF CHURCH) (CITY, STATE) (DATE OR YEAR)

MATRIMONY: _____
(NAME OF CHURCH) (CITY, STATE) (DATE OR YEAR)

DIVORCED: _____
DATE (CITY, STATE)

ANNULMENT: _____
DATE TRIBUNAL REPRESENTATIVE (CITY, STATE)

DO YOU HAVE A SPECIFIC INQUIRER IN MIND THAT YOU WISH TO SPONSOR? YES _____ NO _____

IF "YES," WHAT IS THE NAME OF THE INQUIRER YOU WOULD LIKE TO SPONSOR? _____

IF "YES," WHAT IS YOUR RELATIONSHIP TO THE INQUIRER? _____

IF "NO," WOULD YOU WORK WITH THE RCIA TEAM TO BE ASSIGNED TO AN INQUIRER NEEDING A SPONSOR? _____

WHY DID YOU DECIDE TO BECOME AN RCIA SPONSOR? _____

DO YOU HAVE ANY QUESTIONS OR CONCERNS ABOUT THE RCIA PROCESS? _____
