

Rite of Christian Initiation of Adults (RCIA) - Checklist

Name & Surname of applicant: _____

Address: _____

Contact Number: _____

Present church affiliation: _____

Minister: _____

Date of Baptism: _____ Place: _____

Duration of contact with Catholic Church: _____

Factors influencing decision: _____

Spouse name & surname: _____

Religion: _____

If Catholic, have you all sacraments up to confirmation level:

YES	NO
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Ministry : _____

Children name/s, surname & religion: _____

Sponsor name & surname _____

Contact number: _____

Baptised date: _____ Place : _____

Confirmed date: _____ Place: _____

Ministry: _____

Relation to candidate: _____

Sacred Heart Kabega, Port Elizabeth

Please supply copies of the following

CANDIDATE	BAPTISM CERTIFICATE	
	IDENTITY DOC/PASSPORT	
	MARRIAGE CERTIFICATE	
SPONSOR	BAPTISM CETIFICATE	
	CONFIRMATION CERTIFICATE	
	IDENTITY DOC/PASSPORT	