



Diocese of Salina

2018-2019 Parish Request for the Sacrament of Confirmation

Pastor/PLC:	Email:
Parish/Parishes:	Phone:
Parish Address:	Number to be Confirmed:
City & Zip Code:	Year last administered: If not 2017-2018, next year anticipated:
Parishes, if combined:	Location, if combined:

The above Parish requests the Sacrament of Confirmation for 2018-2019: **Yes** **No**

Preferred time of the year for the Sacrament of Confirmation: **Fall 2018** **Winter/Spring**

Preferred Day/Time of the week: **2019**

Weekday: Tuesday Wednesday Thursday Time am pm

Weekend: Saturday Sunday Time am pm

If you have a specific date and time in mind, please indicate below. Please note that this not guarantee the date/time you may have requested. You may also list alternate dates/times of your preference. Please be sure your requested date/time does not conflict with other school, parish and/or community events. If the date/times you have indicated are already filled by other commitments on the Bishop’s schedule, you will be called and offered other possible open dates.

1 st Choice: Date/Time	2 nd Choice: Date/Time
3 rd Choice: Date/Time	4 th Choice: Date/Time

Comments:

All parishes are asked to kindly return this form to the Office of the Bishop by Friday, July 13, 2018. You may also scan and email. After tJuly 31, a 1st draft schedule for the Sacrament of Confirmation will be prepared and will be sent to the parishes via the August SDNB. (More details in the July 2018 SDNB.)

All parishes are required to complete and return this form, even if you are not planning to have Confirmation in 2018-2019. If you have any questions, contact the Bishop’s Office at 785-827-8746 Ext. 34 or chancery2@salinadiocese.org. Thank you.