



## **PARENT TESTIMONY SHEET**



### **PARENTS:**

Please testify that your teen has met **Diocesan Policy #311.4 - EXPERIENCE OF CHRISTIAN LIVING** requirements.

Teen's Name: \_\_\_\_\_

1. Has your teen had faithful participation in the sacraments of Reconciliation and Eucharist?

YES \_\_\_\_\_ No \_\_\_\_\_

If yes, please briefly explain how that was accomplished: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Has your teen had a commitment to ongoing human and spiritual growth and development through prayer and good works?

YES \_\_\_\_\_ No \_\_\_\_\_

If yes, please briefly explain how that was accomplished: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Has your teen had involvement in the Church of the Nativity parish community?

YES \_\_\_\_\_ No \_\_\_\_\_

If yes, please briefly explain how that was accomplished: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. After Confirmation will you continue to assist your teen in fulfilling the Sunday obligation to attend weekly mass?

YES \_\_\_\_\_ No \_\_\_\_\_

If no, please briefly explain why: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent Signature: \_\_\_\_\_