**Godparent/Sponsor Eligibility Testament**

Name of Baptism/Confirmation Candidate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Sacrament to be received: ○** Baptism **○** Confirmation

Parish/City/State Where Receiving Sacrament\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Many, in choosing a Godparent or Sponsor, want to ask a good friend or a family member whom they wish to honor. It is indeed an honor to be asked, however the choice should be made based on different criteria other than friendship or family. For example, one would choose a surgeon not based on friendship or familial relationship but because of their skill as a surgeon. The same is true of a choice for Godparent or Sponsor. The Godparent or Sponsor should be someone who is passionate about their Catholic faith, an “expert”, who faithfully practices it. The Godparent/Sponsor testimony below reflects this personal commitment to the Catholic Faith and to the Candidate.

**In the presence of** a parish representative (Staff Member or Clergy)   
I, the God Parent/Sponsor hereby testify: [initial each statement]

\_\_\_\_\_\_\_\_\_ **YES**, I sincerely believe in the Lord Jesus Christ and strive to live my Christian faith as taught by the Roman Catholic Church by: (initial each statement)

1. Participating in Mass every Sunday and Holy Day of Obligation. \_\_\_\_\_\_\_

2. Receiving the Holy Eucharist regularly. \_\_\_\_\_\_

3. Making use of the Sacrament of Confession at least once a year and as necessary. \_\_\_\_\_\_

4. I am member of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parish and participate its activities as my time allows. \_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_ **YES**, I am at least 16 years of age and have received the following sacraments (circle which)

○ Baptism ○ Communion ○ Confirmation ○ Marriage

\*If Married:\_\_\_\_\_ **YES,** my marriage has been blessed in the Catholic Church \*\_\_\_\_\_No, just married civilly

\*If Single/Divorced: \_\_\_\_\_ **YES**, I am living chastely as appropriate for a unmarried Christian life

**(I am not having intimate sexual relations/cohabitating)**

**Godparent/Sponsor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**THIS SECTION IS TO BE COMPLETED BY YOUR PARISH PRIEST OR STAFF MEMBER**

**Parish/Church**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Phone #:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parish Witness Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Circle One:*** Pastor / Vicar / Staff Member  *Parish Seal*

**Testimonio De Elegibilidad Para Ser Padrino/Madrina**

Nombre del que será Bautizado/Confirmado \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Sacramento que recibirá: ○** Bautismo **○** Confirmación

Iglesia/Parroquia en la que se celebrará el sacramento\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Muchos, al elegir un padrino o madrina, escogen a un buen amigo o a un miembro de la familia a quien desean darle el honor. De hecho, sí es un honor ser elegido; sin embargo, la elección debe hacerse en base a criterios distintos. Por ejemplo, cuando se elige a un médico cirujano no elegimos basándonos en la amistad o en el parentesco, sino por su habilidad como médico cirujano. Lo mismo es para escoger a un padrino o madrina. Éstas deben ser personas que viven apasionadas por su fe católica, "expertas en la fe" y que fielmente la viven. El testimonio siguiente para ser padrino o madrina refleja este **compromiso personal** con su fe católica y también con el ahijado(a).

**En la presencia de un representante de mi parroquia** (sacerdote o empleado asignado)   
Yo, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, doy mi testimonio a lo siguiente: [*marque con sus iniciales*]

\_\_\_\_\_\_\_\_\_ **SÍ**, Creo sinceramente en el Señor Jesucristo y me esfuerzo por vivir mi fe cristiana como lo enseña la Iglesia Católica Romana [*marque con sus iniciales*]:

1. Asisto a Misa todos los domingos y días de obligación. \_\_\_\_\_\_\_

2. Recibo la sagrada comunión regularmente. \_\_\_\_\_\_

3. Frecuento el sacramento de la confesión por lo menos 2 veces al año o cuando es necesario. \_\_\_\_\_\_

4. Soy miembro de la parroquia \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ y participo y ayudo en sus actividades, conforme me es posible. \_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_ **SÍ**, tengo por lo menos 16 años de edad y he recibido los siguientes sacramentos; [*marque cuáles*]

○ Bautismo ○ Comunión ○ Confirmación ○ Matrimonio

\*Si es casado(a):\_\_\_\_\_ **Sí,** estoy casado en la iglesia católica. \*\_\_\_\_\_\_\_ Estoy casado solo por lo civil.

\*Si es soltero: \_\_\_\_\_ **Sí**, estoy viviendo castamente, lo apropiado para una persona soltera.

(No estoy teniendo relaciones sexuales, sin estar casado por la iglesia católica)

**Nombre de Padrino/Madrina: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Firma: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Domicilio: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ESTA SECCIÓN DEBE SER COMPLETADA POR SU PÁRROCO/SACERDOTE O EMPLEADO ASIGNADO***THIS SECTION IS TO BE COMPLETED BY YOUR PARISH PRIEST OR STAFF MEMBER*

**Parish/Church**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Phone #:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Parroquia* *Teléfono:*

**Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Domicilio:*

**Parish Witness Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*Firma del Sacerdote/Empleado*Pastor / Vicar / Staff Member *Fecha:*  *Parish Seal*