REQUEST for FACULTY TO CONFIRM THE ADULT CATHOLIC CANDIDATES.

This is a sample letter of the Request for Faculty to Confirm from the Bishop. It contains the necessary information needed for the faculty to be granted.

The letter should be mailed to Bishop Mark L. Bartchak, Mary Mother of God, Pastoral Center, 2713 W. Chestnut Avenue, Altoona, PA 16601 The Chancellor of the Diocese of Altoona-Johnstown, Mrs. Teresa M. Stayer will complete the necessary form.

If it is necessary for a Deacon Administrator to request the faculty he must name the priest who

will be conferring the sacrament, and an adapted second l by the intended conferring priest. The letters should be ma Confirmation must be conferred by whom the faculty was the faculty has been requested for.	etter of request be written and signed ailed together. The Sacrament of granted to, and on the date on which
(On Parish letter head)	
	(date)
Dear Bishop Mark,	
I am writing to request permission to confer the Sacrament of Confirmation for (Full name(s) or Please See attached list)	
On (date of intended of Confirmation N	∕lass)
This Candidate/These Candidates are baptized Catholics whom have completed the sacrament preparation within the parish Adult Preparation Process or Rite of Christian of Initiation of Adults for the Un-catechized, already baptized.	
	Salutation:
	(Signature of Pastor or Priest Administrator)

Printed name of Pastor or Priest Administrator