

# Quinceañera Candidate Screening

Family Envelope #: \_\_\_\_\_

Full Name: \_\_\_\_\_

Parents Names: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Phone #/s: \_\_\_\_\_

Complete Mailing Address: \_\_\_\_\_

Proposed Celebration Date: \_\_\_\_\_ Approved Date: \_\_\_\_\_

Language of Mass: \_\_\_\_\_ Celebrant: \_\_\_\_\_

Time of Mass: \_\_\_\_\_ Rehearsal Date/Time: \_\_\_\_\_ @ \_\_\_\_\_

Is Quinceañera assisting Religious Education Classes? \_\_\_\_\_

If so; church name, place and dates: \_\_\_\_\_

R.E. letter received on: \_\_\_\_\_ By: \_\_\_\_\_ (only if needed)

**Quinceañera must attend 6 months of Religious Education Classes prior to event in order to have celebration:**

Class Attending: \_\_\_\_\_ Day/Time Attending: \_\_\_\_\_ @ \_\_\_\_\_

Month 1 verified by: \_\_\_\_\_ Date: \_\_\_\_\_

Month 2 verified by: \_\_\_\_\_ Date: \_\_\_\_\_