

IV. LEARNING STYLE *continued*

Writing (At what level is your child's writing skills? Does your child like to write stories/keep a journal?)

Hands On (Does your child enjoy doing projects or making crafts?)

Group Work (Does your child enjoy working with others?)

It will help to know your child's strongest attributes or challenges.

For example: Mary is very outgoing and gets excited when she is have fun. She becomes quiet when she doesn't understand something. She works well with other children. Mary also has a 30% hearing loss in her left ear. She may not hear you if you are standing behind her and speaking normally

V. GENERAL QUESTIONS

Please describe the types of religious education in which your child/teen participated.

What contact has your child/teen had with the Catholic Church to date?

What are some of the questions or concerns your child/teen has about the Catholic Church?

Date	Rite/Document	Notes
	Application	
	Rite of Acceptance/Welcome	
	Sponsor Info	
	Certificate	
	Sacramental Record	CMS/Logos/Bap Register

Child/Teen Inquirer Information Form

Child/Teen Name:

First: _____ Middle: _____ Last: _____

Date of Birth: _____ Age: _____

Place of Birth: _____

include **locality** (town, city, etc), **region** (state, province, territory, etc), and **country**

Grade Level: _____ School: _____



RCIA
Adapted for children

