

Hours/Events Confirmation Service Sheet

Name of Candidate: _____

Please circle one: **Middle School** **Confirmation 1** **Confirmation 2**

Parent Signature: _____

Candidate Signature: _____

*Please note: All service hours must be supervised and signed to be accepted.**Round to the nearest ¼ hour when recording.*

Please return completed forms to the Youth Coordinator.

ONLY COMPLETED FORMS (both sides) WILL BE ACCEPTED.**10 or more hours OR 5 Events.**

Date	Activity	# Hours	Supervisor Signature & Phone Number

Total Hours: _____

Youth Coordinator Signature: _____

St. Mary, Mother of the Church
Year-long Confirmation Service Sheet

Year _____

Name of Candidate: _____

Please circle one: Confirmation 1 Confirmation 2

Parent Signature: _____

Candidate Signature: _____

Name of Service Opportunity: _____

Dates Completed:

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Describe how you served others during this activity. (Complete Sentences)

Name of Activity Leader (PRINT): _____

Signature of Activity Leader: _____

Activity Leader Phone Number: _____

Please return completed forms to the Youth Coordinator.
ONLY COMPLETED FORMS (both sides) WILL BE ACCEPTED.