

CONFIRMATION SERVICE PROJECTS

Candidate Name: _____

Telephone Number: _____

Church & Community (*minimum of 7 hours recommended*)

Service Project #1: _____ date: _____ # hours: _____

Signature of Supervisor: _____

Description of Project (to be completed by candidate): _____

Service Project #2: _____ date: _____ # hours: _____

Signature of Supervisor: _____

Description of Project (to be completed by candidate): _____

Family (*minimum of 3 hours recommended*)

Service Project #1: _____ date: _____ # hours: _____

Signature of Parent/Guardian: _____

Description of Project (to be completed by candidate): _____

Attach any additional information and/or projects

Please use the back of this page to further explain how your service work impacted and continues to impact others. How was it a continuation of the work of Jesus Christ?

Signature of Catechetical Administrator _____ Date: _____

Form E - Service