Confirmation Service Hours Record

Student's Name: _____

Hours of Service	Date Performed	Service Performed	Who Benefitted from your service? * Mark: P-S-C	Adult Supervisor's Signature

25 service hours performed for the betterment of your parish, school or community **(not for your family, immediate or extended).** **P = Parish** **S = School** **C = Community**

Total Hours Submitted on this form: _____

Student's Signature: _____ Date: _____

Half due December 12th, 2018 and remaining due prior to Confirmation (exact date TBD).