

# Rite of Confirmation

## Confirmation Service Hour Form

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

Year in Confirmation formation: first \_\_\_\_\_ second \_\_\_\_\_

Phone: \_\_\_\_\_

Date of the Service Project: \_\_\_\_\_, 200\_\_

Hours of service for this project: \_\_\_\_\_

PERSONAL \_\_\_\_\_

COMMUNITY \_\_\_\_\_

PARISH \_\_\_\_\_

**Instructions:** Please list the activity you are reporting. Explain what you did, what you learned and how your faith was affected by your service. **Have the activity supervisor sign the form and provide their telephone number.** Turn in the activity to the Youth Ministry Secretary's office at your earliest convenience or at your next class.

**Activity:**

---

---

---

---

---

**What I learned and how my faith has been affected:**

---

---

---

---

---

---

**Activity Supervisor Signature:**

\_\_\_\_\_  
**Phone number:** \_\_\_\_\_

Please turn this form into the Youth Ministry office or it may be faxed to (317) 849-9388 to the attention of Office of Youth Ministry.