

# Confirmation Service Hour Sheet

**Name of Student:** \_\_\_\_\_  
**Phone #:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

Please have adult supervisor fill out the service job, number of hours and brief description of service along with signature, date of service and phone #. Confirmation Students may begin collecting hours in April.

**PARISH: Parish service hours must be completed at St. Jude Parish Only. The total number of parish hours needed is twelve.**

**Service:** \_\_\_\_\_ **Hours:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Description:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Title:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Service:** \_\_\_\_\_ **Hours:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Description:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Title:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Service:** \_\_\_\_\_ **Hours:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Description:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Title:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Service:** \_\_\_\_\_ **Hours:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Description:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Title:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**COMMUNITY: Community service hours must be volunteer hours that assist the community. School service hours for the upcoming school year may be used but must be documented on this form only. The total number of community hours needed is twelve.**

**Service:** \_\_\_\_\_ **Hours:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Description:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Title:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Service:** \_\_\_\_\_ **Hours:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Description:** \_\_\_\_\_

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