



**Catholic Tri-Parishes of Brockton**

*Christ the King 508-586-1575*

*Our Lady of Lourdes 508-586-4715*

*Saint Edith Stein 508-586-6491*

**Confirmation Service Hours Completion Form 2018-2019**

Confirmation Candidate's Name: \_\_\_\_\_

Type of service performed: \_\_\_\_\_

Number of hours completed: \_\_\_\_\_ Date of Service: \_\_\_\_\_

Description of service: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Confirmation Candidate signature: \_\_\_\_\_

Date form completed: \_\_\_\_\_

Supervisor's name: \_\_\_\_\_ Supervisor Phone: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

**Confirmation Service Hours Completion Form 2018-2019**

Confirmation Candidate's Name: \_\_\_\_\_

Type of service performed: \_\_\_\_\_

Number of hours completed: \_\_\_\_\_ Date of Service: \_\_\_\_\_

Description of service: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Confirmation Candidate signature: \_\_\_\_\_

Date form completed: \_\_\_\_\_

Supervisor's name: \_\_\_\_\_ Supervisor Phone: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

**Confirmation Service Hours Completion Form 2018-2019**

Confirmation Candidate's Name: \_\_\_\_\_

Type of service performed: \_\_\_\_\_

Number of hours completed: \_\_\_\_\_ Date of Service: \_\_\_\_\_

Description of service: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Confirmation Candidate signature: \_\_\_\_\_

Date form completed: \_\_\_\_\_

Supervisor's name: \_\_\_\_\_ Supervisor Phone: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

**All hours must be completed and form returned by April 7, 2019**

[www.BrocktonCatholic.org](http://www.BrocktonCatholic.org)