



St. Thomas the Apostle PREP

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ST. THOMAS THE APOSTLE RECORD OF CONFIRMATION SERVICE HOURS

Service hours must be completed BY SEPTEMBER 14, 2026.

Candidate's Name: _____ **Total hours:** _____

I am a young disciple of Christ preparing for Confirmation. I want to follow in the footsteps of Jesus by offering my time and talents to our Church, school and community. I freely accept the opportunity to be a steward of faith and will volunteer 15 hours of my time by serving others.

Candidate's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

Please complete for each service project each time:

SERVICE PROJECT: _____ **DATE(S):** _____

WHY DID YOU CHOOSE & WHAT DID YOU LEARN? _____

SIGNATURE OF SUPERVISOR: _____ # OF HOURS: _____

PRINTED NAME OF SUPERVISOR: _____ PHONE # _____



SERVICE PROJECT: _____ **DATE(S):** _____

WHY DID YOU CHOOSE & WHAT DID YOU LEARN? _____

SIGNATURE OF SUPERVISOR: _____ # OF HOURS: _____

PRINTED NAME OF SUPERVISOR: _____ PHONE # _____

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