



St. Mary's Parish, Mansfield, MA
Confirmation Formation Year 1
STUDENT SERVICE HOURS FORM

As a Catholic, your life is a life of service. Please turn in this form to your teacher at least every two weeks.

Student Name _____ Grade ____ Room _____ Date _____

Please describe the event/activity. How did you serve others? #of hours _____

REQUIRED: Signature of supervising adult: _____

St. Mary's Confirmation Formation Program
Website: www.stmarymans.org
Rev. 9/5/17

P: 508-339-4621 F: 508-339-0612
Email: Confirmation@stmarymans.org
Approved by _____



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