

# Confirmation Parish Service Reflection Form

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

Year in Confirmation (circle one)    Year 1            Year 2

Type of Parish Service and Location of Event:

\_\_\_\_\_

\_\_\_\_\_

Number of Hours Completed: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Telephone # of Supervisor: \_\_\_\_\_

Briefly describe your experience participating in this event/with this ministry and the impact that it has had on you.

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

\*Please note: all fields are required. Confirmation service is parish service—it must be done at a Parish event or with a Parish ministry. All teens must submit this form to account for their Confirmation service.

