

**CONFIRMATION SERVICE PROJECT FORM**

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GRADE: 8<sup>TH</sup> 9<sup>TH</sup> 10<sup>TH</sup> (CIRCLE ONE)

CANDIDATE'S  
NAME: \_\_\_\_\_  
(PLEASE PRINT)

Parish Ministry SERVICE: \_\_\_\_\_  
\_\_\_\_\_

Community Ministry SERVICE: \_\_\_\_\_  
\_\_\_\_\_

SERVICE DATE: \_\_\_\_\_

TOTAL HOURS SPENT ON SERVICE: \_\_\_\_\_

ADULT SIGNATURE: \_\_\_\_\_  
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RETURN COMPLETED FORM TO  
DESIGNATED BOX IN THE CHURCH LOBBY  
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Questions? Call Shannon Jones 201-407-6995

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