

ST. COLUMBA RELIGIOUS EDUCATION  
P.O. BOX 368  
HOPEWELL JUNCTION, NY 12533-0368  
(845) 221-4900

**CHRISTIAN SERVICE PROJECT REPORT FORM**

Candidates for Confirmation are expected to perform no less than 10 hours of service in the parish or in the community.

This form must be returned directly to the Religious Education Office so that the completion of service can be recorded in the Religious Ed data base.

**THIS FORM MUST BE RETURNED TO THE RELIGIOUS EDUCATION OFFICE NO LATER THAN DECEMBER 1<sup>ST</sup> OF YOUR EIGHTH GRADE YEAR.**

NAME \_\_\_\_\_ DAY \_\_\_\_\_ ROOM \_\_\_\_\_

**PROJECTS: (Please print) Use the back of form if needed**

- 1. \_\_\_\_\_ HOURS \_\_\_\_\_
- 2. \_\_\_\_\_ HOURS \_\_\_\_\_
- 3. \_\_\_\_\_ HOURS \_\_\_\_\_
- 4. \_\_\_\_\_ HOURS \_\_\_\_\_
- 5. \_\_\_\_\_ HOURS \_\_\_\_\_
- 6. \_\_\_\_\_ HOURS \_\_\_\_\_
- 7. \_\_\_\_\_ HOURS \_\_\_\_\_

**SIGNATURES:**

- 1. \_\_\_\_\_ DATE \_\_\_\_\_
- 2. \_\_\_\_\_ DATE \_\_\_\_\_
- 3. \_\_\_\_\_ DATE \_\_\_\_\_
- 4. \_\_\_\_\_ DATE \_\_\_\_\_
- 5. \_\_\_\_\_ DATE \_\_\_\_\_
- 6. \_\_\_\_\_ DATE \_\_\_\_\_
- 7. \_\_\_\_\_ DATE \_\_\_\_\_