



## MOST HOLY TRINITY CATHOLIC CHURCH Service Hour Form

This is to certify that \_\_\_\_\_,  
Name of Candidate

a Confirmation candidate at Most Holy Trinity Catholic Church, has completed \_\_\_\_\_  
Number of hours

service hours at \_\_\_\_\_  
Name of institution or organization

by performing the following duties: \_\_\_\_\_  
Description of service performed

**Attested to by:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

