Service Reflection

The goal of service is to assist you in preparing for the celebration, or “living out” of the Sacrament of Confirmation. Projects are not things you do to “get Confirmed”, but an invitation to practice the Works of Mercy, and deepen your desire to be part of a faith-filled parish community. 25 hours of service are expected, at least 15 hours being Christian service is encouraged (ex. parish related service), and 10 hours of community service will be recognized. If you are unsure of the difference, please call Kara or Catherine.

Name of Organization: __________________________ Date of Service: __________________________

Name of Contact Person: __________________________ # of Contact Person: __________________________

# of Hours: ______  Was the project Christian Service or Community Service? (circle one)

Briefly describe service:

Name of Organization: __________________________ Date of Service: __________________________

Name of Contact Person: __________________________ # of Contact Person: __________________________

# of Hours: ______  Was the project Christian Service or Community Service? (circle one)

Briefly describe service:

Name of Organization: __________________________ Date of Service: __________________________

Name of Contact Person: __________________________ # of Contact Person: __________________________

# of Hours: ______  Was the project Christian Service or Community Service? (circle one)

Briefly describe service:
Name of Organization: ___________________________________ Date of Service: ____________________

Name of Contact Person: ___________________________________ # of Contact Person: ________________

# of Hours: _____ Was the project Christian Service or Community Service? (circle one)

Briefly describe service:

Name of Organization: ___________________________________ Date of Service: ____________________

Name of Contact Person: ___________________________________ # of Contact Person: ________________

# of Hours: _____ Was the project Christian Service or Community Service? (circle one)

Briefly describe service:

Name of Organization: ___________________________________ Date of Service: ____________________

Name of Contact Person: ___________________________________ # of Contact Person: ________________

# of Hours: _____ Was the project Christian Service or Community Service? (circle one)

Briefly describe service:

Name of Organization: ___________________________________ Date of Service: ____________________

Name of Contact Person: ___________________________________ # of Contact Person: ________________

# of Hours: _____ Was the project Christian Service or Community Service? (circle one)

Briefly describe service:
Please describe the services you performed and how they made you closer to your faith and/or community. What did you learn from these experiences? (Feel free to type or attach loose-leaf as your response)