

Year I & Year II Confirmation Service Form

2018-2019 Religious Education Year

Student Name (Please Print): _____ Year I or Year II- **circle one**
First Last

Date of service: _____ Time in _____ Time out _____ Total Hrs Served: _____

Name of Supervisor/Leader: _____
(Please print)

I certify _____ hours of service were completed. Supervisor Signature: _____

Location:

St. Vincent de Paul _____ Franciscan Friars _____ Roadrunner Food Bank _____

Nursing Home _____ Special Olympics _____ Gabriel Project _____

Church – List Activity: _____

Please answer all questions completely.

1. What were your responsibilities? What did you do?
2. How and who benefited from these community service hours?
3. What did you gain through this service? Would this be a place you would volunteer at after your service hours are completed? Why or Why not?
4. The Corporal Works of Mercy are: Feed the hungry, Give drink to the thirsty, Clothe the naked, Shelter the homeless, Visit the sick, Visit the imprisoned, Bury the dead. The Spiritual Works of Mercy are: Counsel the doubtful, Instruct the ignorant, Admonish sinners, Comfort the afflicted, Forgive offenses, Bear wrongs patiently, Pray for the living and the dead.

Which Works of Mercy were exemplified in your service? Explain how they were exemplified.