

COMMUNITY SERVICE THEOLOGICAL REFLECTION ON SERVICE HOURS

Following these instruction, the student will prepare a one page reflection (typed and double-spaced) on their volunteer efforts in this past months. It must be turned in to the Campus Ministry Office by the end of the Second Quarter before Mid-term exams. Exams are the second week of January. Any questions should be directed to Mrs. Jeanne Thompson at 944-4014 ext. 309.

Reflection Format: To be written in paragraph form.

- I. Be sure to include your name, grade level and date on the paper.**
- II. Write a brief paragraph describing the type(s) of service done this year.**
- III. How does this service relate to your understanding of Jesus and the Church's call to service? You must include a scripture.**
- IV. How did your faith (belief in God) come into play or, if you feel it did not, how might you have brought your faith to this experience?**
- V. How has this experience deepened your relationship with Jesus and your brothers and sisters?**
- VI. What were the most positive and negative experiences during your service? Explain why? What did you learn from these?**
- VII. Would you do this or a similar form of service again? Why or Why not?**
- VIII. Turn the paper and signed forms by the due date!**

NOTE: Paragraphs should be at least two to three sentences. Reflections must be typed then stapled to the completed and signed forms. Incomplete service hours and reflections papers will result in a failure to receive proper accreditation for the required Religion credits needed for graduation. Parents are not permitted to sign the service verification forms without pre-authorization by the Campus Minister.

**BISHOP GUILFOYLE CATHOLIC HIGH SCHOOL 2010-2011
CHRISTIAN SERVICE PROGRAM**

NAME _____ **CLASS:** _____

PHONE #: _____ **PARENTS:** _____

PLACE OF SERVICE: _____

ADDRESS: _____
Complete mailing address

ACTIVITY/DUTY PERFORMED: _____

NUMBER OF HOURS: _____

SUPERVISOR: _____

(Please print full name and title)

SUPERVISOR'S COMMENTS:

SUPERVISOR'S SIGNATURE: _____

DATE OF SIGNATURE: _____

PHONE # OF SUPERVISOR: _____