

Service Summary Sheet

Student Name: _____ Date of Service: _____

Service Location: _____ Total Number of Hours Completed: _____

Type of Service Activity:

☐ Church ☐ School ☐ Community

Description of Service

- Briefly describe what you did and who you served during your service project.

Reflection Questions

1. How did you feel before, during, and after your service experience?

2. What was the most challenging part of your service? What was the most enjoyable or worthwhile?

3. Was your service an example of a Corporal or Spiritual Work of Mercy? Explain which Works of Mercy were present and how.

Signature of Student: _____ Signature of Supervisor: _____

Signature of Parent/Guardian : _____ Date: _____