



St. Pius X Confirmation Service Experience

Name _____	Date _____
Hours of Service _____	Place of Service _____
Supervisor's Name _____	Supervisors Phone # _____
Supervisor's Signature _____	

In order to receive credit for service this form must be legible and complete

Reflection: Write about your experiences and feelings during this service

Today I:

Some of the things I encountered were:

I dealt with these things in this manner:

If I do this project again I would:

The best thing that happened while I was doing this project was:

I learned:

I felt that this experience:
