

# Guided Reflections for Home Service Experience

Name: \_\_\_\_\_

Completion service date: \_\_\_\_\_ Date reflection given: \_\_\_\_\_

Parent signature of service completion : \_\_\_\_\_

In 3-5 sentences explain the details of your service experience, why you choose this act of service, and who all were involved.

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What did you learn about yourself during this service experience?

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What were the needs of those you served and how were you Christ-like during your service experience?

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Explain what it was like to serve or serve with your family.

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**All three service experiences must be completed and guided reflections turned in by the **April 26** Confirmation Life Night.**

## Guided Reflections for Parish Service Experience

In 3-5 sentences explain the details of your service experience, why you choose this act of service, and who all were involved.

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What did you learn about St. Laurence during this service experience?

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What were the needs of those you served and how were you Christ-like during your service experience?

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Why does serving your parish matter to your Confirmation?

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**All three service experiences must be completed and guided reflections turned in by the **April 26** Confirmation Life Night.**

Name: \_\_\_\_\_

Date reflection given: \_\_\_\_\_ Completion service date: \_\_\_\_\_

Contact person : \_\_\_\_\_ Contact signature: \_\_\_\_\_

Contact phone #: \_\_\_\_\_ Contact email: \_\_\_\_\_

## Guided Reflections for “Neighborhood” Service Experience

In 3-5 sentences explain the details of your service experience, why you choose this act of service, and who all were involved.

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What did you learn about neighborhood community during this service experience?

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What were the needs of those you served and how were you Christ-like during your service experience?

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Why does serving your “neighborhood” matter to your Confirmation?

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**All three service experiences must be completed and guided reflections turned in by the **April 26** Confirmation Life Night.**

Name: \_\_\_\_\_ Completion service date: \_\_\_\_\_

Name of Sponsor: \_\_\_\_\_ Date reflection given: \_\_\_\_\_

Contact person : \_\_\_\_\_ Contact signature: \_\_\_\_\_

Contact phone #: \_\_\_\_\_ Contact email: \_\_\_\_\_