

Confirmation Service Hour Report

Please complete this form as you complete your required service hours and show to attendance keeper.

Student Name: _____

Date	Type	Project	Hours
Total Service Hours Completed			

Types of Service

- | | | | |
|-------------------|---------------------------|--------------------------|------------------|
| 1 - Environmental | 4 - Educational | 7 - Help Children | 10 - other _____ |
| 2 - Safety | 5 - Disaster Relief | 8 - Help Elderly | |
| 3 - Public Health | 6 - Community Improvement | 9 - Help Homeless/Hungry | |

When you have either filled up the above space, or met the 15 required hours, please select one your projects and answer the following questions.

What did you do, and who benefited from this act of service? _____

What sacrifices did you make to do the project? _____

What does God's Word want us to learn about sacrificing and service? (see Ph 2:1-4; 1 Jn 3:1-19; Lk 10:25-37; and Jn 13:2-17) _____

What did you learn, and how was your faith affected by this project? _____

Some Possible Ideas for Service Hours

- | | | |
|---------------------------------|--|-------------------------------|
| - Volunteer at your school | - Mow a neighbors lawn for free | - Wash cars for free |
| - Volunteer at church | - Participate in a Mission/Servant Event | - Serve your family |
| - Babysit for free | - Do some A.R.K.s (Act of Random Kindness) | - Serve with our food panty |
| - Serve in Sunday School or VBS | - Make a meal for a family in need | - Volunteer at a Nursing Home |