

NAME \_\_\_\_\_

GRADE \_\_\_\_\_

# LOURDES ACADEMY 2018-2019 Catholic Ministry Verification Form

GRADE 6.....10 HOURS  
GRADE 7..... 15 HOURS\*  
GRADE 8.....20 HOURS

*\*This DOES NOT include the hours required for Confirmation  
or hours towards NJHS.*

ORGANIZATION AND ADDRESS (AND EVENT - IF APPLICABLE)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DESCRIBE YOUR RESPONSIBILITIES

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE (S) OF SERVICE _____	HOURS _____
SUPERVISOR NAME (PRINT) _____ SIGNATURE _____	SUPERVISOR PHONE AND EMAIL _____ _____
PARENT SIGNATURE _____	STUDENT SIGNATURE _____

Teacher Notes:     	APPROVAL DATE _____
	APPROVED BY: _____

**THE REFLECTION PORTION, LOCATED ON THE BACK OF THIS  
FORM, IS REQUIRED FOR EACH FORM SUBMITTED.**

WRITE A PARAGRAPH (**at least 5 sentences**) DESCRIBING YOUR EXPERIENCE.

Include who and how your time benefited someone else.

How did your activity tie into the Works of Mercy or help your parish or parish school?

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

PARAGRAPH TWO: What did you learn about yourself and the gifts that God gave you through this act of service? What did you learn about the poor and the vulnerable through this act of service? (**at least 5 sentences**)

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

*MUST BE COMPLETED TO RECEIVE SERVICE HOURS*