

For office use ONLY:  
Community: \_\_\_\_\_  
Congregation: \_\_\_\_\_

## Confirmation Service Credit Form

8 Service credits needed each year

2-3 hours of service = 1 credit; Only 4 credits per event per year

Your Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Service Project: \_\_\_\_\_

Date(s) and time(s) of service: \_\_\_\_\_

Total number of hours served: \_\_\_\_\_

What exactly did you do? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Where did you experience God in your work? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How did you serve your neighbor in your work? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What was the hardest thing about this service event? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How did you change through the work you did? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Your signature: \_\_\_\_\_

Authorized Adult signature: \_\_\_\_\_