

# WORKS OF SERVICE COMPLETION FORM

Name \_\_\_\_\_

Service Activity \_\_\_\_\_

Location at which Service was performed \_\_\_\_\_

Date of Service \_\_\_\_\_ Time of Service \_\_\_\_\_

Total Number of Service Hours \_\_\_\_\_

1. *Describe your service experience.*

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2. *Who did your service benefit and how?*

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3. *By being involved in this service activity, what did you learn about justice and serving those in need?*

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4. *What did you learn about yourself? Did the service experience bring to mind anything that you might want to change about yourself, your priorities or how you live your life?*

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**Name of Activity Supervisor:** \_\_\_\_\_

**Signature of Activity Supervisor:** \_\_\_\_\_