



Holy Trinity High School Confirmation Program, 2024-2025 School Year

SERVICE REFLECTION SHEET

Student Name

Date of Service

Service Project
Name and Location

of
hours

Describe the service project and its goal:

Be Christ. How did you help others? **See Christ.** How did you encounter Christ in those you served?

What did you enjoy about the service project? Were there any challenges?

Name of Project Supervisor _____

Signature _____