

**St. Margaret Mary Parish
2015-16 Confirmation 1
Requirement Sheet**

DUE DATE: No later than April 10, 2016

Candidates
Name: _____ **Confirmation**
Sponsor: _____

Confirmation Name: _____ **Letter to the**
Bishop turned in (y/n) _____

Service Hours:

Homeless Ministry Date _____ Hours _____

Project _____ Hours _____

Project _____ Hours _____

Project _____ Hours _____

Project _____ Hours _____

Youth Ministry Nights/Events: (Date or Event)

1 _____ 2 _____ 3 _____

Usher/Greeter at Mass (Dates):

1 _____ 2 _____ 3 _____ 4 _____

Parent Formation Events:

1 _____ 2 _____ 3 _____

4 _____ 5 _____

Service Mania Reflection Sheet

Name: _____ Date You Did Service _____

Name of Service: _____ Total time in service: _____

Explain what you did....

How did you feel when you did this service?

What did this experience teach you about God, or others or yourself?

What did you learn after doing this service project?

What is one thing you want to remember about this service project?

Small Things done with God's love...

...can change the world!!

Crazy to serve

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