

Pope John XXIII R.C. Church
8290 Soule Road
Liverpool, NY 13090

Office of Faith Formation
Phone: (315) 652-1094
Fax: (315) 652-6631

Service Project Report

Your Name:	Today's Date:
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Year I:	Year II:	Hours Worked:
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Hours for:	<i>Church:</i>	<i>Community:</i>	<i>Home:</i>
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Where did you perform the service: _____

Describe what you did: _____

Describe how you felt about the project: _____

Evaluation from Supervisor	<i>Name:</i>	<i>Signature:</i>
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Candidate was:	<i>Helpful:</i>	<i>Somewhat helpful:</i>	<i>Not very helpful:</i>
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I was please with: _____

I was dissatisfied with: _____

