

SAINT GEORGE ROMAN CATHOLIC CHURCH CONFIRMATION SERVICE HOUR VERIFICATION FORM

Name of Volunteer _____

Date(s) of Service _____ Number of Hours _____

Agency/Person/Event _____ Phone Number _____

Supervisor's Name _____ Supervisor's Email _____

What were the duties of the Student Volunteer? _____

GENERAL APPRAISAL

Please evaluate the student volunteer in the areas listed below, using the following ratings:

5 – Superior 4 – Above Average 3 – Average 2 – Below Average 1 – Poor U – Unknown

1. Ability to work with other volunteers	1	2	3	4	5	U
2. Ability to work with staff/supervisors	1	2	3	4	5	U
3. Rapport with clients	1	2	3	4	5	U
4. Attendance	1	2	3	4	5	U
5. Initiative and independence	1	2	3	4	5	U
6. Overall effectiveness	1	2	3	4	5	U

Additional comments _____

STUDENT REFLECTION

Student must write a 50 word or more reflection on how this particular volunteer opportunity helped him to become more "motivated to model Jesus' life of spontaneous service."

(Supervisor's Signature)

(Student Volunteer's Signature)

(Teacher Initial & Approval Date)

Any problems, praises, or concerns please contact:

Mr. Michael Palmer, Director of Religious Education or Fr. Andrew M. Boyd, Parochial Vicar
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