

St. Alphonsus Service Learning Project

Please Print

Name _____ Date _____

This service completes my obligation for the following year: 1 2

Area of Service: Church Community

Service Activity: *Provide a brief description of the activity including who was involved and the length of the service project.*

Reflection: *Offer your thoughts about the project. How did you feel doing it? What did you learn? How is this related to what God expects of us?*

Form can be mailed, brought to class or completed online:

St. Alphonsus Liguori
14040 Greenwell Springs Road
Greenwell Springs, LA 70739
Fax 225 261-5650 www.alphonsus.org