

**Please type form  
& turn in within 2  
weeks of service  
performed**

## **St. Alphonsus Liguori Parish**

411 N Wheeling Rd, Prospect Heights, IL



### **Confirmation Service Hour Form**

Student Name \_\_\_\_\_

Date \_\_\_\_\_

Location of Service \_\_\_\_\_

Hours of Service Completed \_\_\_\_\_

Signature of Supervisor \_\_\_\_\_

In four **paragraphs** or more, please describe:

- What inspired you to do service at this location
- What type of service you provided
- How does this service make you feel, as a person
- How does this service affect your outlook as a Catholic, now and in the future.

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**Please type, on a Word Document and attach the form with a  
supervisor's signature.**

**(The attached form must be 500 words or more.)**

**(Please use 12 point Times New Roman font and single spaced.)**

**Thank you and please return your completed Service Hour form to**

**Anne Balzanto**

**847-255-9490**