

WORKS OF CHARITY GUIDELINES

*Serving others through Works of Charity / Mercy is rooted in our faith in Jesus and flows from the grace of God. As part of our Christian duty of life-long service to others, following in Jesus' footsteps, each candidate is asked to complete two (2) **different** Works of Charity as part of his/her journey to Confirmation.*

- † Time incurred for each Work of Charity must be a *minimum* of 2 hours of your time. Time may be *accumulated over more than one day* (e.g., if you mow an elderly neighbor's lawn and it only takes 1 hour, mowing it more than once will count as one Work of Charity.) Alternatively, helping with Vacation Bible School is considered one Work of Charity even though it involves more than the minimum 2 hours.
- † The Work of Charity should be performed for an individual or a group other than your immediate family. (*Immediate family includes parents, siblings, grandparents, aunts and uncles and cousins.*)
- † Works of Charity completed in conjunction with scouts or your school **may be counted** if they follow these requirements.
- † Your parent must sign the Works of Charity Reflection Form.

Thank you in advance for the serving others through these Works of Charity. Your efforts will not go unnoticed and you will be appreciated by those you help! May God's peace be with you as you serve others as the hands and feet of our Lord and Savior, Jesus Christ.



DUE BY: DECEMBER 04, 2016

WORKS OF CHARITY REFLECTION FORM

*Please use the back of this page if you need more writing space.
A typed report is also acceptable.*

Candidate's Name: _____ **Project #** 1

Name of person who supervised this service: _____

What Work of Charity did you perform? How long did it take? _____ Hours

Describe your experience.

Do you think that you made a difference?

What did you learn about yourself in helping others?

How has this service experience enhanced your understanding of Confirmation?

WORKS OF CHARITY REFLECTION FORM

Please use the back of this page if you need more writing space.

A typed report is also acceptable.

Candidate's Name: _____ Project # 2

Name of person who supervised this service: _____

What Work of Charity did you perform? How long did it take? ____ Hours

Describe your experience.

What did I learn from this experience?

How did performing this service affect me (e.g., emotionally, spiritually)?

What else can I do to help others?