

Service Points Form

Name of Student	Grade	Date of Service
		Please check one below
<input type="checkbox"/>	<input type="checkbox"/>	Service <input type="checkbox"/>
1. What activity did you participate in for this point?		
2. List three of the most important things you learned participating in the activity listed above*?		
3. How did you see God working in the activity listed above*?		
4. How has the activity listed above* shown you the importance of participating in a church beyond worship?		
5. From this experience what can you take home and share with your parents?		

*Activity listed in question #1

If your response to any question is "I don't know" or "no answer", please do not fill out this form for the activity you have done.

Signature of Parent (or other caring adult):