STEWARDSHIP REPORT

Top portion to be filled	ut completely by youth / student:	
NAME:	GRADE:	
EVENT or ACTIVITY:		
PLACE OF EVENT:		
	:	
DESCRIPTION OF STI	WARDSHIP:	
	PARISH STEWARDSHIP OR COMMUNITY STEWARDSHIP	
WHAT ARE YOU FEEL WHY?	NG AS YOU THINK ABOUT THE PROJECT & PEOPLE YOU HELPE)?
DESCRIBE HOW YOU	USED YOUR GIFTS & TALENTS.	
HOW DID THIS EXPER	IENCE ALLOW YOU & OTHERS TO LIVE OUT YOUR FAITH IN CHRI	ST?
	ion: You can hand in hours to Ben, give them to your catechist, email to r mail to 404 W. Lawrence Street, Appleton, WI 54911 anytime during	
Gra	Grades 9-10 hours are due by April 15 th le 11/Confirmation hours are due by August 1st	
Bottom portion to be	filled out by adult in charge of the event after all portions above are filled	d in.
PERSON IN CHARGE:		
SIGNATURE:	DATE:	