



# Bishop Carroll Catholic High School – Stewardship Program 2018-2019

## Junior Verification Form

Goal – 20 stewardship hours to the needy and socially marginalized

Class: *Faith & Reason or Church History / Virtues: justice and hope*

**\*Must be completed and submitted by April 15, 2019.**

### Guidelines for Junior Stewardship Hours:

- These hours are service **to a person (or persons)** who are truly in need or those who are socially marginalized.
  - “Needy” is defined as a person who is incapable of carrying out necessary duties due to physical incapability, age, illness, or handicap.
  - “Socially marginalized” is defined as a person who is poor, homeless, homebound, infirm, or imprisoned.
- Students **must** choose from one or more of the organizations listed on the “Service Opps for Juniors and Seniors” spreadsheet available on the BCCHS website here <http://www.bcchs.org/faith-life/stewardship-opportunities>
- **This service is intended to be direct service to a person or group of persons** who are needy or marginalized.
- Hours must be supervised and verified by a supervisor under which the hours were performed (hours CANNOT be verified by one’s parents unless the service is offered to a needy member(s) of the student’s family or the student’s parent(s) officially acts as supervisor for the service).
- Juniors may choose to do **up to one half** (one half equals 10 hours) of the required hours by working on the campus of BCCHS outside of normal school hours.

Student’s Name: \_\_\_\_\_ Parish: \_\_\_\_\_ Date of Service: \_\_\_\_\_

Name of Organization/Non-Profit: \_\_\_\_\_ Hour(s) Served: \_\_\_\_\_

Type of Activity: \_\_\_\_\_ Category of Need: \_\_\_\_\_

(physical incapability, age, illness, handicap, poor, homeless, homebound, or imprisoned)

1. Describe how you performed stewardship towards the needy and socially marginalized.

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2. Explain what you learned from your participation in this activity.

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3. How do you think you grew in the virtues of justice and hope by participation in this activity?

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**By signing below, I affirm that the hours I have reported are correct and honest. Failure to report accurately will result in disciplinary action up to and including failure of the course.**

Student’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**After the Above has been filled in by the Student, this section is to be completed by the supervisor (who supervised the above stewardship hours):**

Supervisor’s Name (print): \_\_\_\_\_ Phone Number: \_\_\_\_\_

Supervisor’s evaluation of student’s overall contribution (check one):  Excellent  Good  Average  Poor

Comments: \_\_\_\_\_

Supervisor’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_