

Volunteer Monthly Summary

Highs/Lows *(Please consider your service site experience, community living experience and personal experiences)*

1. What were some of the **highs** that you experienced in this last month?

2. What were some of the **lows** that you experienced in this last month?

Spiritual Reflection *(Please use detail when answering this.)*

3. Where did you experience God in this last month?

Comments to the Director *(Anything else I need to know?)*

4.

Signature _____ For month of _____

**Please return in the stamped addressed envelope or e-mail to
JSzolek@spsmw.org**

