



DISTANCE LEARNERS' CHAPEL REFLECTION REPORT

The Course:

WS305/WS501: Institutional Requirement (Chapel)- Online Student

Semester: Spring / Summer/ Fall 20____

Student Name: _____ (Student ID: _____)

Degree Program: _____

Email: _____ Phone: _____

The name of the church or parachurch ministry in which I will be regularly attending the weekly worship service:

Address:

Homepage:

Pastor/Worship Director:

Email: _____ Phone: _____

Sequence Number: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10

Chapel Attendance Date:

Chapel Activities: (list all the activities that have been made available to you during this particular worship service [e.g. praise, communal prayer, sermon etc])

A Summary of Sermon: (about 10 lines)



GEORGIA
CENTRAL UNIVERSITY

6789 Peachtree Industrial Blvd., Atlanta, GA 30360

TEL (770)279-0507 FAX (770)279-0308

[ademic@gcuniv.edu](mailto:aademic@gcuniv.edu) www.gcuniv.edu

A reflection on your worship experiences: (5 or more lines)

Student Signature: _____

Date: _____

Chapel Office Use Only

Reflection report received by : _____ Date: _____

Reflection report graded by: _____ Date: _____

Grade: Pass / Fail

Final grade submitted to the Registrar's Office by: _____ Date: _____