

Student Name (please print): _____

**Emerging Leader Program
2009-2010
Community Service Form**

Part I. Basic Information (To Be Completed by Student)

Semester (circle one): Fall Spring Year: 20_____

Community Service

Organization: _____

Supervisor/Coordinator Name (please print): _____

Contact Phone Number: _____ E-Mail: _____

How many hours did you commit to this activity? _____

Date(s): _____

(please separate form for different agencies or activities)

Briefly describe the activities that you completed:

(additional space for any above responses on the back)

Part II. To Be Completed by Community Service Supervisor/Coordinator

Emerging Leaders are required to perform 10 hours of community service for each semester. This time commitment represents 1 hour per week for 10 weeks. Students are encouraged to do more than the minimum 10 hours.

How many TOTAL hours did the student commit to this activity? _____

Has this student's participation been satisfactory? Yes No

Comments:

Community Service Supervisor/Coordinator Signature DATE

Student Signature DATE

This form is due in WT800 by Wednesday, December 9, 2009 at 4:30 pm.