Student Development and Activities Record
Entry and Validation Data for the Recognition Award

(Please print all information; use one form for each entry)

1. Name _____

2. Current Address_____

3. Permanent Address_____

4. Telephone_____ Email_____

5. Expected Year of Graduation & Semester_____

6. What type of activity is this? Check all that applies:

   A. ___ Club Involvement   B. ___ Community Service
   C. ___ Leadership Experience   D. ___ Volunteer Experience

7. Semester and year of involvement or service(Please check all that applies):

   Fall   __   20___
   Spring   __   20___

8. If you were an active member of a Student Organization, please specify the name of the organization(s)

   _____

9. For Leadership Experience within your organization, please specify:
   A. W hat position(s) did you hold? _____

   B. What were the major responsibilities of the position? _____

10. If you participated in a minimum of fifteen hours of community service, please specify the name of the established

    non-profit organization/agency _____
    A. Attach a letter from the organization that you volunteered for, specifying the number of hours that were
        volunteered, and a brief description of the community service performed.

_____   _____
Student Signature   Date

_____   _____ _____ _____
Name of Official Verifying this Entry   Title   Phone #   Date
Or E-Board Member of Organization

_____   _____
CSI Verification   Date

Return to Center for Student Involvement, University Center, Room 110