

# ***Delta* Record of Service**

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**Student Section** -(To be filled out completely by the student prior to getting the supervisor signature)

Name: \_\_\_\_\_ Student#: \_\_\_\_\_ Clump: \_\_\_\_\_

**Explanation of service** (To be filled out by student *prior* to getting signature):

A. What service did you provide **and** what community did it benefit?

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B. What is the name of the non-profit or community group/organization that you worked with, through, or for?

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C. Why did you choose to do this service? Or, why is this service important to you?

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Date(s) of Service: \_\_\_\_\_

Time(s) of service: \_\_\_\_\_

Total hours of service: \_\_\_\_\_

\*\*\*\*\*

(Over)

Student Name \_\_\_\_\_

**Supervisor Section** – (To be filled out by project supervisor after students fill out front side)

Name: \_\_\_\_\_ Tel.# \_\_\_\_\_

**\*\*\*Before signing, please confirm that students have filled out the other side of this sheet.**

Total number of hours of service performed by the student:

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Group/Organization: \_\_\_\_\_

Supervisor Comments (Optional):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Over)

## **Delta Community Service Criteria**

### **Eligible Community Service Should:**

- a. Provide a donated service that promotes the good of the community
- b. Provide a donated service with, through, or for a non-profit group or organization
- c. Involve some sort of commitment or rewarding experience

#### Note:

If you are planning to participate in an activity that does not fit the following criteria, but would like it to count towards your Delta service requirement, please check with a Community Service Coordinator before performing the service.