



Presidential Leaders and University Scholars

Community Service Record

First name

Last name

Date of project

Name of Service Activity

Amount of Hours Requested

Activity must be pre-approved prior to completion of service.

Approved by:

PLUS Advisor Signature or attached e-mail confirming approval

Please provide a brief description of the service you completed and the leadership experience you gained.

(To be completed by Activity Sponsor)

How many hours student
completed

Activity Sponsor Signature:

Sponsors's Phone Number

E-mail

Thank you for giving our PLUS Scholars the opportunity to gain leadership experience through your activity.