

# Sacred Heart University Athletics Community Service Log

NAME \_\_\_\_\_ SPORT \_\_\_\_\_

*Use a separate sheet for each different agency*

| <u>Agency</u> | <u>Supervisor</u> | <u>Date</u> | <u>Volunteer Activity</u> | <u>Hours</u> | <u>Verified By</u> |
|---------------|-------------------|-------------|---------------------------|--------------|--------------------|
| 1.            |                   |             |                           |              |                    |
| 2.            |                   |             |                           |              |                    |
| 3.            |                   |             |                           |              |                    |
| 4.            |                   |             |                           |              |                    |
| 5.            |                   |             |                           |              |                    |
| 6.            |                   |             |                           |              |                    |
| 7.            |                   |             |                           |              |                    |
| 8.            |                   |             |                           |              |                    |
| 9.            |                   |             |                           |              |                    |
| 10.           |                   |             |                           |              |                    |
| 11.           |                   |             |                           |              |                    |
| 12.           |                   |             |                           |              |                    |
| 13.           |                   |             |                           |              |                    |
| 14.           |                   |             |                           |              |                    |
| 15.           |                   |             |                           |              |                    |
| 16.           |                   |             |                           |              |                    |
| 17.           |                   |             |                           |              |                    |
| 18.           |                   |             |                           |              |                    |
| 19.           |                   |             |                           |              |                    |

It is required that the reverse side of this form be completed by the above-named student.

This is to certify that the above-named student has successfully completed the 20-hour Community Service requirement as prescribed by the Department of Athletics.

\_\_\_\_\_  
Signature of Advisor

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Date

### Volunteer Agency Information

Name \_\_\_\_\_  
 Agency \_\_\_\_\_  
 Title \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Day Phone \_\_\_\_\_ Eve Phone \_\_\_\_\_

# Student-Athlete Community Service Experience Summary

NAME \_\_\_\_\_ Sport \_\_\_\_\_

*Please provide a summary for each different agency*

1. List the agency, phone number, and supervisor where you volunteered.

\_\_\_\_\_

2. List and describe 4 duties that you performed or new skills you learned.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

3. Describe 3 ways this experience changed the way you see things.

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

4. Describe one funny experience that made a big impression on you.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Describe a specific instance in which you had a big impact on someone else.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. How can you transfer the positive experiences you gained to your everyday life?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. Would you recommend this agency to other student-athletes? Why or why not?

\_\_\_\_\_

\_\_\_\_\_

**Please return a copy of this form to Alicia Alford in the Department of Athletics as soon as completed.**