



College of Nursing

### Community Service Experience Form

Complete and upload this form during the secondary application process. Existing completed activity forms required for organizations such as NHS, scouting, etc. are also acceptable if the same detail about the volunteer activity is provided.

Name (Last, First, MI)	Bleser, Olivia Marie
Date of Birth	2/8/98
Volunteer Organization	HOSA
Describe the nature of the work/volunteer experience you completed (include the date(s) and details about the nature of the volunteering, for example leadership, planning/organizing or participant).	Working with the community to help provide families with a Thanksgiving dinner. I worked with other students collecting food for the families. (10/25/15 - 11/22/15) Selling holiday grams to other students to donate over the holidays to families in need. (12/1/15 - 12/20/15) Going to local middle schools to speak to students and help inform them about safe sex, STD's, Drugs + Alcohol. 11/25/15
Total Hours (Weekly/Monthly)	3 hrs weekly 12 hrs Monthly
<i>I attest that I have completed the hours and volunteer experience as stated above.</i>	
STUDENT Signature/Date	Olivia Bleser 12/22/15
<i>I attest that the student has completed the hours and volunteer experience as stated above.</i>	
ORGANIZATION REPRESENTATIVE Printed Name, Title	Hilda Martin-Lynch Health Occupation Teacher/Host Advisor
Signature/Date	Hilda Martin-Lynch 1-4-2016