

Beebe Healthcare
Margaret H. Rollins School of Nursing
Nursing 201 – Nursing Care of Special Populations

2024 Volunteer Experiences

Indicate (✓): Listed on pre-approved activities or pre-approved by Mrs. Zahner

Volunteer activity: heart walk

Date of activity: 11/3/24

Timeframe of activity: 9:30-10:30 Total Hours: 1

Student signature: Caroline Maul

Community Representative Name: Mrs. Zahner

Community Representative Phone Number: _____

Description of Activity: Walked the 5k to raise awareness
in our community for heart disease/strokes

**STUDENT ELECTRONIC SIGNATURE ON THIS FORM VERIFIES ATTENDANCE.
COMMUNITY REPRESENTATIVE NAME AND PHONE NUMBER MUST BE
PROVIDED FOR PERIODIC AUDIT VERIFICATION PURPOSES.**

Submit this form via Edvance360 Drop Box or hard copy to Mrs. Zahner

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Indicate (✓): Listed on pre-approved activities or pre-approved by Mrs. Zahner

Volunteer activity: simulation lab clean up

Date of activity: 11/11/24

Timeframe of activity: 10:00 - 11:00 Total Hours: 1

Student signature: Caroline Maul

Community Representative Name: Mrs. Crowson/Mr. Tony

Community Representative Phone Number: _____

Description of Activity: Helped clean up the sim lab including
mannequins and the beds.

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Indicate (✓): Listed on pre-approved activities or pre-approved by Mrs. Zahner

Volunteer activity: fall open house

Date of activity: 11/21/24

Timeframe of activity: 4:00 - 6:00 pm Total Hours: 2

Student signature: Caroline Mauld

Community Representative Name: Dr. Watson

Community Representative Phone Number: _____

Description of Activity: Helped give tours to prospective students

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