

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: Open House

Date of activity: 11/20/24

Timeframe of activity: 1400-1600 pm Total Hours: 2

Student signature: _____

Community Representative Name: Dr. Alison Watson

Community Representative Phone Number: n/a

Description of Activity: Prospective students were given a tour of the MHR building, talked about the programs, and what to expect, and encouraged to join.

**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