

BEEBE HEALTHCARE
MARGARET H. ROLLINS SCHOOL OF NURSING
Nursing 102 – Nursing Care of Adults
Volunteer Form
2025

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

Volunteer activity: Margeret H. Rollins SON Open House

Date of activity: 04/07/2025

Timeframe of activity: 1600-1800 Total Hours: 2

Student signature: Jocelyn Holden

Community Representative Name: N/A

Community Representative Phone Number: N/A

Description of Activity: Throughout the activity it concluded providing tours to possible future student, showing classrooms, library, simulation labs, etc. Along with answering questions individuals had about the process and provided key information about the timeline.

***ALL SUBMISSIONS MUST BE MADE WITHIN ONE WEEK OF COMPLETING THE ACTIVITY, OR WITHIN ONE WEEK OF RETURN TO SCHOOL, IF COMPLETED BETWEEN SEMESTERS. VOLUNTEER HOURS SUBMITTED OUTSIDE OF THIS TIME FRAME WILL NOT BE ACCEPTED! ***

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