

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: Food Bank (Milford Healthy Pantry) \_\_\_\_\_

Date of activity: 5/3/25 \_\_\_\_\_

Timeframe of activity: 8:30am - 11:15am      Total Hours: 2.75 hrs

Student signature: Makenna Miska

Community Representative Name: Aaron Stone \_\_\_\_\_

Community Representative Phone Number: Email: Astone@Fbd.org \_\_\_\_\_

Description of Activity: Spent the morning greeting  
individuals, stocking the shelves/pantry,  
assisted and guided individuals throughout the  
pantry. Helped with filling carts, bagging  
groceries.

**\*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! \***