

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

2025 Volunteer Experiences

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

Volunteer activity: Wilmington Run of the Mill Trail 10 Miler Runraiser

Date of activity: 11/15

Timeframe of activity: 0800-1100 Total Hours: 3

Student signature: Lacy Bayley

Community Representative Name: Vicky Sullivar

Community Representative Phone Number: gritdelaware@gmail.com

Description of Activity: _____

Fundraiser for local boys and girls club and youth cycling club, donated, helped raise over \$2000, and ran 10 miles

(no phone number provided from host of event just an e

**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