

BEEBE HEALTHCARE  
MARGARET H. ROLLINS SCHOOL OF NURSING  
Nursing 202 – Advanced Concepts of Nursing  
Volunteer Form  
2026

Indicate (✓): Listed on pre-approved activities  or pre-approved by Mrs. Petito \_\_\_\_\_

Volunteer activity: Healthcare Exploration Day

Date of activity: 12/16/2025

Timeframe of activity: 0800-1100 Total Hours: 8

Student signature: [Signature]

Community Representative Name: Dr. A. Watson

Community Representative Phone Number: (302) 645-3100 ext. 5471

Description of Activity: Direct students to their assigned location within the school. Setting up and breaking down of tables and classrooms. Participate on the nurse panel - spoke about my experiences and gave advice to highschool students.

**\*ALL SUBMISSIONS MUST BE MADE ELECTRONICALLY VIA DROPBOX 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. Petito**