

**Covenant School of Nursing  
N401  
Community Service Verification Form**

This is to certify that \_\_\_\_\_ has  
(Print) First name Last name  
completed community service hours as part of the N401 course requirement.

\_\_\_\_\_

**Date**

\_\_\_\_\_  
**Facility / Organization**

**Time In:**

**Time Out:**

\_\_\_\_\_  
**Supervisor (Print name)**

\_\_\_\_\_  
**Supervisor Signature**

\_\_\_\_\_  
**Contact Information (phone or email)**

\_\_\_\_\_  
**Comments:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Students:**

*A total of 4 hours of Community Service is required for N401.* You may complete the hours in 1 block of time or in several smaller increments. You may complete your hours at 1 site or a variety of sites. A different form will be needed for each facility/block of time completed. If doing something other than CHS Community Health Screening, car seat check, or blood donations, you must have prior approval from the N401 Course Facilitator.

**Students are to return completed forms to their clinical instructor the week they perform community service or the course coordinator.**

**ALL hours are due by the end of Week 16 of the semester.**