



WILLIAM JESSUP UNIVERSITY

VOLUNTEER SERVICE REPORT

To be completed by student:

Name _____ () Fr. () Soph. () Jr. () Sr. () 2nd BA
 Today's Date _____ Email _____
 Student Contact (cell preferred) _____ Student ID number _____
 In which term was this service completed? _____ Year _____ Semester: () Fall () Spring () Summer
 Description of completed Volunteer Service: _____

To be completed by Ministry Supervisor:

Minimum semester requirements call for 30 hours of Volunteer Service in an activity for which they are not receiving academic credit or compensation. Volunteer service may include any approved ministry. A maximum of 15 hours per semester can be for on-campus service.

How many hours did the student complete? _____
 Did the student receive payment or academic credit? _____ (If yes, please explain)

How closely was the student's work supervised? () very closely () closely () occasionally () never

Check the items that apply:	Always	Usually	Seldom	Never
Student was punctual	4	3	2	1
Student was industrious	4	3	2	1
Student had a good attitude	4	3	2	1
Student showed initiative	4	3	2	1
Student demonstrated good judgment	4	3	2	1

Please give a quick evaluation of the student's performance or any recommendations you would make to the student for future Volunteer Service work:

Do you have any additional recommendations for improving William Jessup University's Volunteer Service Program?

Would you recommend that the student be given Volunteer Service credit? () Yes () No

Name of Supervisor (please print): _____
 Signature of Supervisor: _____ Date: _____
 Position: _____ Organization: _____
 Phone Number: _____ E-mail: _____

PLEASE NOTE: This form WILL NOT BE ACCEPTED unless it is sealed in an envelope and returned to the WJU Student Life Office *no later* than the Friday *before* Finals Week for the correlating semester.

**SEND TO: WJU Campus Ministries, 333 Sunset Blvd, Rocklin, CA 95765
 OR FAX to (916) 577-2320 - Attention Campus Ministries**

To be completed by Student Life:

Evaluation by Student Life: () Approved () Denied

Authorized Signature

Comments: _____