Community, School and/or Patient Care Service Activities

Instructions:
- Please identify your active involvement in volunteer activities in school, in the community, or in patient care DURING your NP education.
- Type in the table below, using a brief outline format.

Volunteer Activity	Role/Responsibilities	Time Commitment per Month
Example: *Homeless Shelter*	*Health Screenings*	*8 hours/month*

Name:_____