



IUPUI Office of Student Scholarships Volunteer Verification Form 2007-2008

(Information below to be submitted by student)

Name: _____

Email: _____

University ID#/SSN#: _____

Phone: _____

Address: _____

City, State, Zip: _____

(Please check the box below)

As an IUPUI Scholar I understand that I am required to volunteer for a minimum of 7-8 hours during the academic year.

(Information below to be submitted by representative/ individual overseeing the volunteer event)

Name of Organization:

Type of work the student engaged in:

Number of hours the student volunteered: _____

Signature of Volunteer Representative:

Date: _____

Student Signature: _____

Date: _____

If you have any questions concerning this form you may call (317) 274-5516
or e-mail escholar@iupui.edu . Student or volunteer representative may return this form

IUPUI Office of Student Scholarships
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Indianapolis, IN 46202-5143
