FAMU VOLUNTEER AND SERVICE LEARNING PROGRAM

Volunteer and Service-Learning Program
Efferson Student Union & Activities
Florida A&M University
Office of Student Activities
1628 South Martin Luther King Jr. Blvd, Tallahassee, FL 32307
850-599-3400 | volunteerservices@famu.edu

Group Service Hour Verification

Volunteer Chair: Complete all sections below. Attach additional log pages if needed.
Save/upload Format: Project Name – First Initial.Last Name – MMDDYY.PDF.

Date of Confirmation Completion: _____ | Term: ☐Summer ☐Fall ☐Spring

Student Group Information

Club/Organization:_____

Volunteer Chair Name: _____ FAMU email: _____ Phone: _____

Organization or Group/Entity Served

Name: _____

Address: _____

Website: _____Instagram:@_____

Discretion of Group Served: _____
_____

Service Project Details

Date(s) of Service Project: _____ Start time of event: _____ End time of event:_____

Total Hours of Event: _____Total Hours Awarded: _____(add up all hours awarded to all participating volunteers)

Description of service and community benefit: _____
_____
_____
_____

Verifier certification

I (name listed below) certify that the student named above completed the service described and that the dates and hours recorded are accurate. I have direct knowledge of the service and may be contacted to verify this information.

RSO Advisor/Professional Service Verifier Information (Professional/Staff)

Full name (print): _____ Position: _____

Work email: _____ Phone: _____

Signature: _____ Date completed: _____

Club/Organization Volunteer Chair's Information (Student)

Full name (print): _____ Position: _____

Work email: _____ Phone: _____

Signature: _____ Date completed: _____

Handwritten or DocuSign signature required. Typed or font-generated signatures are not accepted.

VSLP SERVICE INSTRUCTIONS (UPDATED SUMMER 2026)

FAMU VOLUNTEER AND SERVICE LEARNING PROGRAM

Volunteer and Service-Learning Program
Efferson Student Union & Activities
Florida A&M University
Office of Student Activities
1628 South Martin Luther King Jr. Blvd, Tallahassee, FL 32307
850-599-3400 | volunteerservices@famu.edu

Instructions: The Volunteer Chair will complete columns 2, 4, 5, and 6 of the form, and their advisor will initial. Leave the FAMUSTUID# column blank. The volunteer will enter their FAMU Student ID number in the 3rd column, "FAMUSTUID#," and highlight the entire row where their name appears prior to uploading to iStrike. **Attach additional log pages if needed.**
Volunteer Save/upload Format: Project Name – First Initial.Last Name – MMDDYY. Send in PDF format to volunteers.

	Column 2	Column 3	Column 4	Column 5	Column 6	Column 7
	Full Name	**FAMUSTUID#**	**Start Time**	**End Time**	**Hours Awarded**	**Service Verifier's Initial**
EX.	**Johnny Rattler**	**012345678**	**10:00 a.m.**	**1:30 p.m.**	**2.5**	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13						
14.						
15.						
16.						
17						
18						
19.						
20.						
21.						
22.						
23.						
24.						
25.						
26.						
27.						
28.						
29.						
30						
31.						
32.						
33.						
34.						
35.						

Service Verifier's Initial: _____