

Student Personal Service/Activities Form

Please fill out the following information to assist faculty in selection of various awards. This information will be kept in a file in Diana Fahl's office and can be updated at any time. Thank you!

Name _____ Student ID # _____

Address _____ Phone _____ Email _____

Program- ASN _____ LPN/ASN _____ BSN _____ RN/BSN _____

Year- Sophomore _____ Junior _____ Senior _____

Please describe any personal service, activities, or leadership roles in the following areas:

Community service/activities

IU East campus activities/ Organization memberships

Work Experience

Interests/Hobbies