



## Office of Service-Learning

Dr. Rory L. Bedford, Director  
318-274- 2553 or 274- 2118

### Service-Learning Volunteer Form

Name \_\_\_\_\_ Date: \_\_\_\_\_ G# \_\_\_\_\_

Classification \_\_\_\_\_ Email Address: \_\_\_\_\_ Contact # \_\_\_\_\_

Name of Organization or Class \_\_\_\_\_

Name of Advisor: \_\_\_\_\_ Contact Information \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ Home Number: \_\_\_\_\_

Name and Description of Activity: \_\_\_\_\_

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Clubs and organizations should add an additional sheet that list names and G #s of members who participated in the activity. Completed forms should be returned to the Office of Service-Learning.