

## Sociology Department Community Involvement Preliminary Data Sheet

Before you begin service at your volunteer site, you must submit to the sociology department chairperson specific information about your placement. Please complete the form below and submit it by the second week of the placement. The information below must be on file and current to ensure credit.

Student Name	Middle	Last
Home Address (# and street)		
City	State Zip	
Telephone	Email	
Salem State University Student ID	Academic Standing □ Junior □ Sen	ior
Major		
Name of Volunteer Organization:		
Address of Organization:		
Phone Number: Website Address:	:	
Contact Person (Project Supervisor):		
Supervisor's Phone Number: Su	upervisor's Email Address:	
Community Service Schedule (days and hours):		
Estimated number of hours per week to be spent on site/engage	d in community service:	
Description of Project:		
Specific Responsibilities and Duties:		
Student Name (printed):		
Student Name (printed):Student's Signature:		Date:
		Date: