Mission Faculty of Nursing, Asia-Pacific International University.

Volunteer Service Record. Academic Year ..... Semester.....

Name..... ID ..... Year .....

Scholarship: ☐ Not Awarded a Scholarship ☐ Awarded a Scholarship, Please Specify.....

Title of the Volunteer Activity	Location of Activity Implementation	Date	Time	Number of Hours	Details of the Activity	Signature of the Certifying Authority	Student's Signature

Remarks: Scholarship recipients are required to complete at least 30 hours of volunteer service per academic year.