Academic Service-Learning Hour Tracking Log Deadline: Submit to Faculty Instructor

Use this form to record your Academic Service-Learning (A S-L) hours in the community for posting to your official FAU transcript. Your transcript is a permanent record of your academic achievements and a direct reflection of your college career. For more information about A S-L, visit fau.edu/leadandserve.				Student Information: First Name		
Guidelines to Follow:				Last Name		
 Only non-student signatures will be accepted. Complete the Academic Service-Learning Student Survey at fau.edu/leadandserve. Survey available early November. Keep a copy of this form for your records. 				FAU E-mail Z Number (Mandatory)		
Academic Service-Learning hours are those activities required by your courses. Volunteer hours are <u>NOT</u> recorded on this form. Log Volunteer hours online through <u>www.noblehour.com</u> . Instructional guide for NobleHour available at fau.edu/leadandserve.				I have read and understand the guidelines. I certify that I have completed all the hours recorded on this form. I am aware that the service activities I complete are subject to review by my faculty instructor who may decide that the activities completed did not meet the guidelines and criteria.		
robierrour available at fauleuu/feauailuserve.				Student's Signature	Date	
Community Agency/Non-profit Organization Information: Agency Name Agency Address				Course/Faculty Information: Course Name Faculty Name		
Date	# Hours	Supervisor's signature (Non-student signature only)		Supervisor Information	Academic Service-Learning Activity Description	
			Supervisor Name:			
			Supervisor Email: Supervisor Phone Number:			
TOTAL FOR PAGE 1						

Contact FAU Lead & Serve with
any questions:Boca Raton
Student Serve

Boca Raton Student Services, SS, 224 Ph: 561.297.3607 Broward - Davie Student Union, SD 219 Ph: 954.236.1264 Northern - Jupiter SR, 151 Ph: 561.799.8724 Faculty Instructor

Date	# Hours	Supervisor's signature	Supervisor Information	Academic Service-Learning Activity Description		
			Supervisor Name:			
			Supervisor Email:			
			Supervisor Phone Number:			
TOTAL FOR PAGE 2						
TOTAL FOR		USE ADDITIONAL SHEETS IF NECESSARY				
PAGES 1 & 2						

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