



Community Service Report

Please complete all questions listed in this form and send to Michael.Przydzial@nau.edu, or submit in person to the Campus Recreation Administration Office.

Application Start: First day of Fall Semester/Application Deadline: Due by the third Monday in April

Sport Club Name:		Current Tier:	
Primary Contact:		Phone Number:	
NAU Email:		NAU ID#:	
Date(s) of Service Completed:			
Location(s) of Service:			
Verification Contact Name:			
Verification Email:		Verification Phone:	
Description of Community Service Completed			
Number of Members who Participated:		Hours of Service:	
Total Community Service Hours (# of Members x Hours of Service)			
Agreement			
<i>Please initial next to each item listed below.</i>			
	I understand that false, incomplete, or missing information will result in this report being rejected.		
	The information provided on this form is true, correct and accurate.		

Administrative Use Only			
Date Received:		Logged into Tier System? (Y/N)	
Verified? (Y/N)			