

Alpha Epsilon Delta

Pre-Medical Honor Society

George Mason University

VOLUNTEER HOURS VERIFICATION FORM

Student's Name: _____

Student's G Number: _____

Member Status (please check one):

- AED member
- Non-AED Member
- In Process of Joining

Dates of Service:

Explain below the volunteer duties performed. What did you learn from this experience?

Total Hours Served: _____

Volunteer Coordinator's Name: _____

Volunteer Coordinator's Signature: _____

Volunteer Coordinator's Contact Number: _____

Disclaimer: I verify that all provided information set forth is true and accurate to the best of my knowledge.

Student's Signature: _____

*You will receive 3 points for a 5 hour outside volunteering service.

*Turn this completed form to the Biology Department located in David King Hall 3005.

*If you select "In Process of Joining" make sure you have turned in your application and the one-time fee. Check the website for any supplementary forms required. <http://www.gmu.edu/org/aed>