

Event Verification Form

To verify service, please complete this form for each different event and submit with your portfolio.

Name of Event: Friends of chamber music concert

Organization: Friends of chamber music

Type of Service: Day of Event volunteer

Describe your service activities:

Set up food tables, greeted and directed guests,
picked up trash and tore down food tables.

Purpose of Event:

To engage with community over the love of
music while raising money for the organization.

Date of Service: 10/15/19 Start time: 5:45 End time: 8:45

Total Hours: 3

Supervisor Information

Name: Debra Shaker

Position: PEMC Coordinator

Phone: _____

OR
Email: dshaker@tamuc.edu

Signature: Debra Shaker Date 11/17/19

Student Information

Name: Alexi Arstein

Signature: Alexi Arstein