



Chancellor's Leadership Corps
UA Little Rock
501-916-6000 | clc@ualr.edu

CLC Volunteer Service Verification

Scholar's Name: _____

Scholar's Classification: _____

Where did you complete your volunteer service? _____

When did you complete your volunteer service? _____

How many hours of volunteer service did you receive? _____

The duties completed included the following:

Representative Information

Name (Print): _____

Contact Information: _____

Signature: _____

Date: _____