

**ILLINOIS VALLEY COMMUNITY COLLEGE
CO-CURRICULAR TRANSCRIPT PROGRAM
ACTIVITY VERIFICATION FORM**

Student's Name _____

Student's Phone Number _____

Category of Event (See Activity Category Guide) *Please circle one:*

Club/Organization Leadership Development Career Development

Campus Service Community Service Athletics/Recreation Other

Name of Event _____

Your Title/Position for Event _____

Description of Your Responsibilities _____

Date(s) of Activity (Please include all dates)

Total Number of Hours of Participation _____

Activity Representative Verification Information

Activity Representative's Name _____

Activity Representative's Title/Position _____

Activity Representative's Phone Number _____

Signature of Activity Representative _____ **Date** _____

IVCC ACTIVITES CATEGORY GUIDE

This list is not all-inclusive and may be subject to change and interpretation

CLUBS/ORGANIZATIONS

Any of the IVCC Student Organizations

LEADERSHIP DEVELOPMENT

Athletic Team Captain Club/Organization Officer

Project Success

Student Trustee

Special Training

Workshops, Seminars, Conferences, Etc.

CAREER DEVELOPMENT

AmeriCorps

Career Services Activities

Workshops, Seminars, Conferences, Etc.

Special Training

CAMPUS SERVICE

Committees/Task Forces

Graduation

Job Fair

Math Competition

Orientation

Student Spirit Day

Tutoring Volunteering

COMMUNITY SERVICE

AmeriCorps

Habitat For Humanity

Labor Of Love

March Of Dimes

Red Cross Blood Drive

Relay For Life

Tutoring

United Way

Volunteering in Church

Volunteering in the Community

ATHLETICS/RECREATION

Athletic Team Member

Athletic Team Manager (Stats, Video, etc.)

Intramural Participant

OTHER

Arts and Letters Series

Honors Program

Music Recitals

Project Success

Scholarships

Theatre Program