

**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