



Freshman Seminar

Mildred Elley-Albany Campus
855 Central Ave.
Albany NY 12206

Volunteer Verification Form

Instructor: _____

Student's Name: _____

Name of Organization where Student is Volunteering: _____

Address of Organization: _____

Phone Number of Organization: _____

Direct Supervisor: (Please list full name, title, and phone number to be reached at.)

Dates and Times Student Volunteered:

Supervisor's Signature: _____ Date: _____

Please note that without this volunteer verification form, students will NOT receive full credit on the final project.

Albany, NY Campus
855 Central Avenue
Albany, NY 12206
p: (518) 786-0855
f: (518) 786-0011

New York City Metro Campus
25 Broadway, Floor 16
New York, NY 10004
p: (212) 380-9004
f: (212) 232-0217

Online Division at Mildred Elley
855 Central Avenue
Albany, NY 12206
p: (518) 786-0855
f: (518) 786-0011

Pittsfield, MA Campus
505 East Street
Pittsfield, MA 01201
p: (413) 442-0333
f: (413) 442-2269