

## BPS Community Service Program: Service Plan

Student's name:

Class Year:

Mentor's name:

### Where do you plan on volunteering this semester?

While you may later need to explore alternative service opportunities outside of those you list below, you should have a concrete idea of service sites where you are looking in to volunteering this semester. Please identify *at least* one of these potential service opportunities:

**Proposed service activities** at listed organization(s):

**Contact information** of the organization's supervisor(s) who will sign off on service hours (please provide first and last name, telephone number email address for the supervisors of each listed service opportunity). If no such supervisor is available, please provide the URL or URLs of the organization(s) where you plan to volunteer.

Supervisor Name(s):

Email and/or URL:

Phone number:

If for some reason you are unable to volunteer at the site(s) you've listed above, it is your responsibility to contact your mentor to update them about your plans to volunteer at a different service site for the semester **before** beginning your hours there. If you have any questions, please contact Clare Fitzgerald at [crffitz@bu.edu](mailto:crffitz@bu.edu) or at (617)353-3187.

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Student Signature/Date

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Mentor Signature/Date