

# Co-Curricular Transcript

## Validation Form



The student named below has requested that his/her participation in the activity sponsored by your organization be included on his/her Co-Curricular Transcript. In order to verify his/her participation, please take the time to fill out this form and return it to the address below.

**(Please print or type all information clearly.)**

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Program Title: \_\_\_\_\_

Program Date(s) \_\_\_\_\_ Program Location: \_\_\_\_\_

Facilitator: \_\_\_\_\_ Department: \_\_\_\_\_

Please describe the activity which the above named student participated in: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

I, the undersigned, request that the information contained in this form be entered on the Co-Curricular Transcript for the student, and I verify that the information is accurate.

\_\_\_\_\_  
Print Name of Verifying Official Title

\_\_\_\_\_  
Signature Date Telephone

.....  
(for office use only)

### Co-Curricular Transcript Component to be credited:

- |                   |                         |
|-------------------|-------------------------|
| _____ Ministry    | _____ On Campus Jobs    |
| _____ Leadership  | _____ Honors/Awards     |
| _____ Athletics   | _____ Misc. Involvement |
| _____ Intramurals | _____ Chapel            |
| _____ Clubs       |                         |

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