

**COMMUNITY SERVICE RECOGNITION PROGRAM
FOR STUDENTS
Basic Data Sheet**

Nominee's Name: _____
Institution: _____
Home Address: _____

Phone: _____
(Please list a number you can be reached during the hours of 8:00 a.m. - 4:30 p.m.)
Email: _____

Community Service

Description of activity and nominee's role in activity: _____

If any part of this activity is tied to job responsibilities, please indicate what part is related to the job and what part is volunteer work:

How long has activity been underway? _____

How has this activity benefited the community? _____

Has this activity received other recognition/awards? (Please list.)

**Please return form to: Russ Deaton, Interim Executive Director, Tennessee Higher Education
Commission, 404 James Robertson Parkway, Suite 1900,
Nashville, TN 37243-0830**