# Alpha Epsilon DeltaaedCrest-b&w- web1aedCrest-b&w- web1

*The National Health Preprofessional Honor Society,*

*Texas Nu Chapter at UT Dallas*

## OUTSIDE HOURS FORM

website: [aedutd.com](http://www.aedutd.com) e-mail: [service@aedutd.com](mailto:service@aedutd.com?subject=Outside%20Hours%20Form%20–%20Fall/Spring%20*Year*:%20Last%20name,%20First%20name)



PLEASE READ THE FOLLOWING CAREFULLY:

Every Pledge or Associate Member of AED is required to accumulate **20 hours per semester** in order to maintain active membership. As of Fall 2022, only 8 outside hours will count towards the semester requirement.

TO SUBMIT OUTSIDE HOURS, **NEATLY** COMPLETE THIS FORM. ALL FIELDS ARE REQUIRED.

ALL OUTSIDE HOURS FORMS MUST BE EMAILED TO [service@aedutd.com](mailto:service@aedutd.com?subject=Outside%20Hours%20Form%20–%20Fall/Spring%20*Year*:%20Last%20name,%20First%20name) WITH THE HEADING “Outside Hours Form – Fall/Spring \*Year\*: Last name, First name” TO BE PROCESSED.

WE ARE NO LONGER ACCEPTING FORMS GIVEN TO THE HPAC OFFICE.

**YOUR NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TODAY’S DATE: \_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_**

**AED MEMBERSHIP STATUS (CHECK ONE): WORKING EMAIL ADDRESS:**

**\_\_\_** NATIONAL MEMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_**ASSOCIATE MEMBER

**\_\_\_** PLEDGE FOR ASSOCIATE MEMBERSHIP

**ORGANIZATION OR HOSPITAL YOU VOLUNTEERED FOR:**

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

**BRIEFLY DESCRIBE THE EVENT AND THE VOLUNTEER WORK YOU DID:**

*UPON COMPLETION OF THE ABOVE, PLEASE GIVE THIS FORM TO YOUR VOLUNTEER COORDINATOR TO COMPLETE.*

**THIS SECTION IS ONLY FOR THE VOLUNTEER COORDINATOR TO COMPLETE:**

**NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**POSITION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(e.g. administrator, volunteer supervisor, event staff, etc.)**

**NUMBER OF VOLUNTEER HOURS THE PERSON ABOVE COMPLETED WITHIN YOUR ORGANIZATION:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PLEASE SIGN & DATE BELOW. THANKS!**



**VOLUNTEER COORDINATOR SIGNATURE DATE**

Visit our website: <http://www.aedutd.com>

Our email address: <mailto:general@aedutd.com>

Mailing address:

Alpha Epsilon Delta, Student Organizations Suite

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