Student Covernment Association	Pr	munity En e-Approva Club Action Pi		
Club Name				
Contact Person C			ontact #	
Project Name				
Location D			Pate of Activity	
See the reverse side of form for a list of pre-project considerations.				
Brief Description of Project				
After completing your project, complete the post-project report on the reverse side of this form and return to SGA.				
For SGA Use Only				
Date Receive	d: 🗋 Pro	e-approved for CAP Award	Date Approved:	
For Business Office Use Only				
Approved by the Coordinator of Communiversity Affairs				
Signature: _			Date:	
Date Receiv	ed:	Amount:	To Account #:	
Process Dat	e:	JE#		

Things to think about as you plan your Community Engagement Project:

Marketing: e-mail to club members, fliers, banners, signs, tabling

Transportation: van reservation, certified drivers, public transportation

- Tools & Equipment: what do you need to complete the project?
- □ Sign-in Sheet: track your participation for full credit
- Complete this form: hours on site, number of students, goals met, etc.

Post-Project Report

Advisor Name	Contact #			
Number of Students Involved in Project				
Hours on Site				
Briefly Describe the Overall Impact of Your Endeavors				

The undersigned off-campus administrator, hereby acknowledges that the project stated above was completed satisfactorily.