**NRS-425 Community Teaching Project: Teaching Acknowledgment Form**

This form acknowledges that the teaching presentation has been completed. Students must submit this form in the digital classroom in Topic 5.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Student Name: | | | | | | | | |  | | Course Section and Faculty Name: | | | | |
| Date of Presentation: | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| Representative Information | | | | | | | | | | | | | | | |
| Representative Name : | | | | | |  | | | | | |  | | |  |
|  | | | | | | Last | | | | | | First | | | M.I. |
| Credentials: | |  | | | | | Title: |  | | | | | | | |
|  | | (i.e., MS, RN) | | | | | | | | | | | | | |
| Organization: | | |  | | | | | | | | | | | | |
| Phone Number: | | | |  | | | | | | | | | | | |
| Email Address: | | |  | | | | | | | | | | | | |
| Student Presentation Information | | | | | | | | | | | | | | | |
| Type of Presentation: | | | | | | | | | | | | | | | |
| PowerPoint presentation  Pamphlet presentation  Poster presentation  Infographic presentation | | | | | | | | | | | | | | | |
| Provider Acknowledgement | | | | | | | | | | | | | | | |
| I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ acknowledge that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | |
|  | (Representative's Name) | | | | | | | | | (Student's Name) | | | | | |
| has participated in a community teaching experience at the organization listed on this form. The organization/agency does not endorse the university or the student; however, the teaching plan developed by the student is considered appropriate and of benefit to the community of interest. | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | |  |  | |
| Representative's Signature (must be handwritten) | | | | | | | | | | | | |  | Date Signed | |