

## Meinig Family Cornell National Scholars

# 2020-2021 ACTIVITY VERIFICATION FORM (AVF), Page 1

#### Important Notes

- 1. LEADERSHIP does not necessarily mean holding traditional titles such as president, chair, or captain, although if you hold these positions, we would like to know. For the purpose of the AVF, leadership means "making a significant contribution/actively engaged; making an impact on an organization or community." Leadership does not include membership alone.
- 2. All hours on- or off-campus during the academic year and during fall, winter, or spring breaks may count toward your requirements as long as they are:
  - Not associated with academic credit;
  - Unpaid, and
  - Accompanied by properly completed/signed AVF.
- 3. A completed AVF is required for each leadership activity you would like to count toward your MFCNS requirements.
- 4. AVFs MUST be signed by a faculty, staff, administrator, or other professional associated with the activity. An AVF form that is verified by a student as an organization representative MUST also be co-signed by a professional staff as listed above.
- 5. Leadership hours to be included must happen between August 20, 2020 and May 10, 2021. You should submit all completed AVFs as a complete package to the Cornell Commitment Office no later than May 10, 2021 at 4:30pm. It is your responsibility to make sure your documentation is complete, clear, and submitted on time. Your MFCNS re-application process is complete once you have submitted your on-line re-application and submitted all your endorsed AVFs.

Student Name			
Description of leadership involvemen organization	Titles held (president, e	tc.)	
Dates of activity: Start Date		ate	
Total Hours Contributed in 2020-202	(not before August 20, 2020	(not after May 10, 2021)	
I verify that I have read and understan to the best of my knowledge.	d the information provided above and th	nat the information I have presented is accurate	
Student's Signature		_Date	

## Meinig Family Cornell National Scholars

## 2020-2021ACTIVITY VERIFICATION FORM (AVF), Page 2

**To the Organization Advisor:** This student is a current member of MFCNS, a unique program designed to encourage academic excellence and active leadership on campus and in the community at large. Applicants are required to verify their participation in leadership activities; as defined on page 1. It is the applicant's responsibility to ensure that all endorsements are of an acceptable nature and submitted by May 10, 2021; however, we ask that you kindly provide your timely assistance to them in this endeavor. Your comments on this student's leadership involvement are extremely helpful and are very much appreciated! Please contact The Cornell Commitment Office at 255-8595 with any questions you may have.

PLEASE COMPLETE THIS FORM AND RETURN TO THE STUDENT. If you wish to maintain confidentiality, please enclose this form in an envelope and sign across the seal or send the form directly to the Cornell Commitment Office at 300 Kennedy Hall, Cornell University. Please type or print.

FOR THE STUDENT TO COMPLETE				
Student Name				
Advisor Name	Title			
Organization	Email			
FOR THE ADVISOR TO COMPLETE				
<ol> <li>Is the student's description of their leadership involvement on the reverse side accurate?         YesNo If not, please explain (attach separate sheet if necessary).</li> <li>Number of hours the student spent in active leadership to this organization since August 20, 2020:</li> <li>Is this activity being compensated by wages or academic credit? YesNo.</li> </ol>				
4. Membership in MFCNS is awarded to students who are committed to helping themselves and others through active leadership. In light of this, we would greatly appreciate your candid appraisal of the student's performance in the following categories:				
Reliability/Responsibility Quality of contribution Motivation Attendance Leadership Followership	Low	High High High High High High High talents improve or complement the		
Please include additional comments on a separate sheet if necessary.  By signing below, I verify that the information provided herein is correct and the hours listed above indicate the time the student spent making significant contributions to this organization and its mission.				
Signature*	1	Date		
*Are you a Cornell undergraduate? Yes** No **If yes, co-signature of faculty, staff, administrator, or				
other professional associated with the activ	ity is required. 	Date		
CO-Signature		Date		

To the Applicant: