



Kingdom of Saudi Arabia
King Saud Bin Abdulaziz University for Health
Sciences
College of Nursing, Jeddah
Community Service



Report Form: Community Service Activity

Ref: CSA/TEMP/004/2015

Title of Activity:
Date of the Activity:
Duration of the Activity:
Beneficiaries: E.g. number of people reached
Outcome(s) Achievement: E.g. Level of success in achieving the intended outcomes
Evidence of the Impact of the Activity (Results of KPI measurement): Evidence of the impact of KPI: Results: E.g. satisfaction mean score
Challenges Experienced:
Recommendations:

Community Service Activity Owner:

Name and Title:

Signature:

Date Submitted:

Chairperson of the Community Service Standard 11 Task Force:

Name:

Signature:

Date: