



COMMUNITY SERVICE AWARD

Chapter: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Brief synopsis of Community Service rendered:**

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**Organization Affiliation(s):** \_\_\_\_\_

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**Award(s):** \_\_\_\_\_

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**Sponsor's  
Comments:** \_\_\_\_\_

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Sponsor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_