



# Christine B. Foundation

## CBF 2018 Scholarship Community Service Form

*Please complete this form and submit with your application*

---

Applicant name (volunteer): \_\_\_\_\_

1) Organization name: \_\_\_\_\_

Organization address and phone number:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of community service:

\_\_\_\_\_

Volunteer's supervisor name (print): \_\_\_\_\_

Volunteer's supervisor signature: \_\_\_\_\_

Total hours completed here in 2017: \_\_\_\_\_

2) Organization name: \_\_\_\_\_

Organization address and phone number:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of community service:

\_\_\_\_\_

Volunteer's supervisor name (print): \_\_\_\_\_

Volunteer's supervisor signature: \_\_\_\_\_

Total hours completed here in 2017: \_\_\_\_\_



# Christine B. Foundation

3) Organization name: \_\_\_\_\_

Organization address and phone number:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of community service:

\_\_\_\_\_

Volunteer's supervisor name (print): \_\_\_\_\_

Volunteer's supervisor signature: \_\_\_\_\_

Total hours completed here in 2017: \_\_\_\_\_

4) Organization name: \_\_\_\_\_

Organization address and phone number:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of community service:

\_\_\_\_\_

Volunteer's supervisor name (print): \_\_\_\_\_

Volunteer's supervisor signature: \_\_\_\_\_

Total hours completed here in 2017: \_\_\_\_\_

**Total hours completed:** \_\_\_\_\_