



G.I.V.E President's Volunteer Service Award Application



NAME (Legal)		
BIRTHDATE (MM/DD/YY)		
ADDRESS (Street, city, zip code)		
CONTACT NUMBER		
EMAIL ADDRESS		
STATUS (circle one)	US Citizen	Permanent Resident

NAME OF CLUB/ ORGANIZATION	PERIOD OF VOLUNTEER	DESCRIPTION	HOURS COMPLETED

Please select the age group and award category you are applying for:

	BRONZE <input type="checkbox"/>	SILVER <input type="checkbox"/>	GOLD <input type="checkbox"/>
Children (11 to 15 years) <input type="checkbox"/>	50 to 74 hours	75 to 99 hours	100 hours or more
Young adults (16 to 25 years) <input type="checkbox"/>	100 to 174 hours	175 to 249 hours	250 hours or more
adults (26 and older) <input type="checkbox"/>	100 to 249 hours	250 to 499 hours	500 hours or more

TOTAL NUMBER OF HOURS: _____

APPLICANT SIGNATURE

DATE