



ArFuture Grant Program



Community Service Form

Students must perform 10 hours of community service per semester to meet continued eligibility requirements.

Student Information

Name: _____

Address: _____

Student ID: _____

Email Address: _____

Telephone Number: _____

Service Information

Name of Organization _____

Contact Name: _____

Contact Email/Telephone _____

Detail of Service Provided: _____

Date/Time of Service: _____

Organization Representative Signature: _____

Student Signature

Date

If you have any questions or concerns regarding the completion of this form, please see the ArFuture representative from your college or university.