

# Community Service & Philanthropy Project Form

## SUU Greek Life

OFFICE USE ONLY

Date Received: \_\_\_\_\_

Received By: \_\_\_\_\_

### Chapter Information

Fraternity/Sorority Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Contact E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

### Project Information & Description

Title of Event: \_\_\_\_\_ Location of Event: \_\_\_\_\_

Type of Event:  Community Service (Hands-On)  Philanthropy (Fundraising & Donations)

Beneficiary: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

Description of Event: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is this project being completed as a part of another organization's philanthropic event?  Yes  No

If yes, which organization(s) is sponsoring the project? \_\_\_\_\_

### Philanthropy/Donation Information

#### Calculating Philanthropy Fundraising:

- Sponsor gets full credit for all money **donated** (money raised minus expenses) to the philanthropic cause. Organizations making financial donations to another group's philanthropy do NOT get credit.

Total Amount of Money **Raised** on behalf of benefiting organization: \_\_\_\_\_

Total Amount of Money **Spent** by chapter to put on project (PR, Facilities, etc.): \_\_\_\_\_

**CHAPTER'S TOTAL MONETARY DONATION:** \_\_\_\_\_

Adopted with Modifications with permission from University of Nevada Las Vegas  
August 2009

**Calculating Philanthropy Donations:**

- Sponsoring organization gets full credit for all material goods **donated** to the philanthropic cause. Organizations making material donations to another organization’s philanthropy do NOT get credit.

Examples: 1,000 items of food collected by XΦ= credit for XΦ  
 75 items of food collected by ΔΨΩ for ΣN philanthropy= no credit for ΔΨΩ  
 5 members of ΑΦ donate blood during campus sponsored blood drive= credit for ΑΦ  
 236 people donate blood during ΣX sponsored blood drive= credit for ΣX

**CHAPTER’S TOTAL MATERIAL GOODS DONATION:** \_\_\_\_\_

**Service Hours Information**

**Calculating Community Service (Hands On) Hours:**

- One member performing one hour of hands on community service work = 1 service hour  
 Examples: working in nursing home, staffing crisis center phone hotlines, highway litter pickup, hospital volunteer, tutoring, Big Brothers/Sisters, staffing an educational booth, educational literature distribution, etc.

Number of Active Members Participating: \_\_\_\_\_ X Number of Hours Served: \_\_\_\_\_ = \_\_\_\_\_ Service Hours

Number of New Members Participating: \_\_\_\_\_ X Number of Hours Served: \_\_\_\_\_ = \_\_\_\_\_ Service Hours

**CHAPTER’S TOTAL HOURS COMPLETED = \_\_\_\_\_ Service Hours**

**Participating Member Information (Attach additional sheets if necessary)**

Name (Last, First)	Signature
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____
11. _____	_____
12. _____	_____
13. _____	_____
14. _____	_____
15. _____	_____

## **Project Verification**

**Please attach a letter of verification documenting the number of hours served, amount of money raised, and/or number of material goods donated. This should be from the benefiting organization and must include a phone number or email address where the project supervisor can be reached.**

**Please make sure you acquire all necessary signatures from your chapter officers and advisor before completing this form.**

Chapter President Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Chapter Philanthropy/Service Chair Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Chapter Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**This form is to be submitted to the Office of Student Involvement and Leadership, SSC 177, within ten (10) business days of completing the service project or philanthropy event.**