

**2025-2026 Philanthropic Service Award**

**ALL AWARDS ARE DUE TO ANDREW RASH’S OFFICE (DSU 2070) BY NOON ON APRIL 1, 2026**

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

Prepared by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Award Requirements:**

**Please Note:**

* **Service hours completed by members for DUI’s/PI’s or court ordered service cannot be counted toward this or any other award**
* **No service hours/money raised can be signed off by alumni of the chapter**
* **Documented hours should be limited to the period of April 3, 2025 – April 1, 2026**
* **Events do not need to be for only the Greek community.**
* **All donations and service hours must be verified in writing by the benefitting organization for each individual member.**
* **Attending or participating other chapter’s philanthropy events (i.e. – pageants) does NOT count toward service hours, unless an actual service is performed (i.e. – adopt-a-highway clean-up)**
* **Hours required to be performed for a major/academic program, work, practicum, or paid/academic credit internships will NOT be counted.**
* **No more than half of chapter philanthropic hours can come from variations of donations (i.e. book drive where chapter gets hours).**

***\*\*\*Separate verification documents are required to meet the following criteria: 1, 2, & 6\*\*\****

1. Chapters must have donated an average of $30 in cash and/or in goods donated per member (including new members). ***Proper documentation is required. Proper documentation includes signed/email verification from benefactor with dollars/value of goods donated, date given, and contact information of benefactor.***
2. Actives and new members must have performed an average of 28 hours of service per person. ***Proper documentation is required. Proper documentation includes signed or email verification form with dates, signature/contact information of benefactor, service performed, and number of hours.***
3. Attach typed community service program, which identifies goals and plan of action.
4. A philanthropic service officer must be active, with a committee if one is needed.
5. One philanthropic activity must be sponsored (or co-sponsored) from April 3, 2025 – April 1, 2026.
6. Chapter must have 25% of their active and new members participate in a combination of Midnight on the Hill or Dance Big Red. Participation is defined as creating a team, meeting all requirements of the teams, and participation in the finale events. ***Verification of team members and a signature of the advisor/executive director for that specific event is required.***
7. Chapter must participate in eight (8) philanthropic activities a year. ***Must include signature [in Excel chart below] of sponsoring philanthropic organization or chapter president OR Timestamped Email confirmation from sponsoring philanthropic organization or chapter president.***



**2025-2026 Philanthropic Service Award Application**

1. Amount of money donated between April 3, 2025 – April 1, 2026.

***Attach proper documentation. Proper documentation includes signed/email verification from benefactor of amount donated, date given, and contact information of benefactor.***

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| --- | --- | --- |
| **Benefactor:** | **Amount Given:** | **Date Given:** |
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**TOTAL DOLLARS DONATED:­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Dollar value of goods donated between April 3, 2025 – April 1, 2026.

***Attach proper documentation. Proper documentation includes signed/email verification from benefactor with dollar value of goods donated, date given, and contact information of benefactor.***

|  |  |  |
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| **Benefactor:** | **Amount Given:** | **Date Given:** |
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**TOTAL DOLLAR VALUE OF GOODS DONATED:­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Money Donated: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (+) Goods Donated: $\_\_\_\_\_\_\_\_\_\_\_\_\_ = Sum: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Sum: $\_\_\_\_\_\_\_\_\_\_\_ / # of Chapter Members \_\_\_\_\_\_ = $\_\_\_\_\_\_\_\_\_ per member (must be at least 30)**

1. List hours of service preformed between April 3, 2025 – April 1, 2026.

***Attach proper documentation. Proper documentation includes signed or email verification form with dates, signature/contact information of benefactor, service performed, and number of hours. No more than half of chapter philanthropic hours can come from variations of donations (i.e. book drive where chapter gets hours)***

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| --- | --- | --- | --- |
| **Services Performed** | **Benefactor:** | **Amount Given:** | **Date Performed:** |
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**TOTAL # OF SERVICE HOURS:­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TOTAL # of SERVICE HOURS / NUMBER OF MEMBERS =**

**AVERAGE # OF HOURS/MEMBER: \_\_\_\_\_\_\_\_\_\_\_**

1. Attach typed community service program, which identifies goals and plan of action.
2. List member(s) who serve on Philanthropy Chair and philanthropic service committee (if such a committee exists).

Philanthropy Chair:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Committee Member (if used):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Committee Member (if used):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Committee Member (if used):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. List chapter sponsored philanthropic service project(s) – only one required:

**Project** **Benefactor Date**

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Chapter must have 25% of their active and new members participate in a combination of Midnight on the Hill or Dance Big Red. Participation is defined as creating a team, meeting all requirements of the teams, and participation in the finale events. ***Verification of team members and a signature of the advisor/executive director for that specific event is required***.
4. Participation in 8 philanthropic activities. ***Must include signature [in Excel chart below] of sponsoring philanthropic organization or chapter president OR Timestamped Email confirmation from sponsoring philanthropic organization or chapter president.***

|  |  |
| --- | --- |
| **Event Name:** | **Signature of Sponsoring Philanthropic Organization or Chapter President:** |
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**2025 – 2026 Individual Volunteer Hour Documentation**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (coordinator’s name) certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (volunteer name) has completed \_\_\_\_\_\_ (number of hours) hours of service to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (benefactor) through \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (what they did: cleaning, cooking meals, etc.) on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date of service).

Should you have any questions, please contact me at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (phone) or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (email).

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

Signature Date



**2025 – 2026 Group Volunteer Hour Documentation**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (coordinator’s name) certify that the attached names (please attach) have completed a total of \_\_\_\_\_\_ (number of hours for all members) hours of service to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (benefactor) through \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (what they did: cleaning, cooking meals, etc.) on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date of service).

Should you have any questions, please contact me at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (phone) or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (email).

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

Signature Date



**2025 – 2026 Philanthropic Donation Documentation**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (benefactor/contact name) certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (organization or individual name) has donated $ \_\_\_\_\_\_\_ (donation) to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (benefactor).

Should you have any questions, please contact me at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (phone) or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (email).

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

Signature Date