

Name (Please Print):

COMMUNITY SERVICE 15 hours per semester COMMITMENT

As a recipient of the RCIP College Scholarsl semester in an effort to "Give Some Back" to	, , ,	, .
This service may be performed at any Wayr serve more than one group to fulfill the hour	,	on of your choice. You may also
This form must be completed and returned 47374 by the end of the semester that the watche funds previously received.		•
Please have a person of authority sign the forecipient of your service, have a form complereturned by December 10, 2022.	,	9
Explain the dates of your contribution listing	ng hours and tasks:	
		
		_
Scholarship Recipient (Print Name)	Signature of Person of Authority	·
	Email of Person of Authority	/ Phone Number
(Note: Community Service is	subject to verification. Falsification of information w	

Once a Red Devil.... Always a Red Devil! Mail or Return to: Richmond High School Alumni Association

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