

SCHOLARSHIP COMMUNITY SERVICE REQUIREMENT CINCINNATUS, UC GLOBAL, & UC NATIONAL OUTREACH AWARDS

Community Service Criteria

- "Those services designed to improve the quality of life for community residents (general public), particularly low-income individuals, or solving problems related to their needs."
National and Community Service Act of 1990
- Further information at www.financialaid.uc.edu/scholarshipservice and supplemental Web pages

Renewal Requirements

- **3.2 cumulative GPA** at the end of spring term
- Completion and submission of **15 hours of service per semester of scholarship funding** (to maximum of 30 hours) annually by end of spring term
- **Maximum of 10 on-campus service hours** at a program, project or service open to public and where no one is normally paid to do similar service at UC
- When using this service verification form, **sign** your paper form and make a **copy** before submitting it
- Submit service forms as hours are completed throughout the academic year (encouraged, not required)
- Service must be completed after the start of fall semester through the final day of spring semester
- While scholarship funding is not available for co-op terms, students can complete service hours while on co-op
- Scholarship renewals will occur over the summer and post on award offers by July 1st

Service Opportunities

Center for Community Engagement
www.uc.edu/cce
2639 Clifton Avenue – Stratford Heights
513-556-1559
community.engagement@uc.edu

Service Requirements & Reporting

Scholarship and New Student Financial Aid Center
www.financialaid.uc.edu/scholarshipservice
540 University Pavilion
513-556-2420
513-556-9171 (fax)





Academic Year _____

Check One: Cincinnati Scholar UC Global Scholar UC National Outreach Scholar Other _____

Scholarship Community Service Hours Report Form

Name (sign below) _____

UCID: _____

UConnect E-mail _____

Phone _____

* Explain in *detail* the service performed and persons or group benefiting from service. Students may not sign for another's service hours as the Agency Representative.

Date	Service Site	Detailed Description of Service and Beneficiary of Service	Hours
	Agency & Agency Representative (please print)	Agency Representative Signature (cannot be a student)	Agency Phone
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I certify that the above information is correct to the best of my abilities.

TOTAL HOURS _____

Student Signature _____

Date _____