

## COMMUNITY/VOLUNTEER ACTIVITIES

Please identify and explain your community/volunteer activities **(NON SCHOOL RELATED/UNPAID COMMUNITY SERVICE)** and the total estimated time spent on each activity, beginning with your most recent activities. Please spell out all names, do not use acronyms.

**\*This page REQUIRES signatures. Please complete by typing, print, obtain signature and attach/upload to online application. Please have Sponsor or Supervisor sign where indicated.**

**POINTS WILL BE DEDUCTED IF THIS PAGE NOT TYPED**

*If you have any questions please call 812-988-4882 or email [scholarships@bccfin.org](mailto:scholarships@bccfin.org)*

Community/Volunteer Activities (Ex. theater, scouts, religious organizations, civic groups, etc.)	School Years (9-12)	Total Hours per Month	Briefly describe your participation* (including leadership positions, awards, letters earned, recognition, etc.)	Signature of Sponsor/Supervisor (required)
Beginning Date:			Ending Date:	
Beginning Date:			Ending Date:	
Beginning Date:			Ending Date:	
Beginning Date:			Ending Date:	
Beginning Date:			Ending Date:	

\*Use additional sheets if you need additional space for the descriptions of your participation in these activities.