Multicultural Greek Council
Texas A&M University
Community Service Event Submission Form

Date Submitted: _____
Chapter: _____
Submitted by: _____
Name *Email*

Name of event: _____
Date of event: _____
Start time: _____ **End time:** _____

How often did the program occur? *(Circle one)*
One time event (1 point) Weekly (5 points) Monthly (3 points)

Program Audience:

□ Campus-wide (attach flyer) *(5 points)*
□ MGC Chapters *(2 points)*
□ Racial/ethnic interest (attach flyer) *(3 points)*
□ Chapter members only *(1 point)*

Purpose of event:

_____
_____
_____

Description of event:

_____
_____
_____

Number of hours completed:

_____ x _____ = _____
Number of attendees Hours of program Total number of hours

Attendance:

___ Only chapter participated (3 points)
___ Partnership with an organization outside of MGC (4 points)
Name of organization: _____
(additional points received for partnership with this organization once per semester)
___ Partnership with another MGC organization (5 points)
Name of organization: _____
(additional points received for partnership with this organization once per semester)

Proof received: *(check all that apply)* □ Flyer □ Attendance list □ Photo(s)
□ Other: _____

Total points awarded: ____ / **20**
Reviewer #1: _____ **Date reviewed:** _____

Reviewer #2: _____ **Date reviewed:** _____

Vice President for Standards:

Initials _____ Date _____

MGC Advisor:

Initials _____ Date _____