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Date: \_\_\_\_\_

TO: Supervisor  
FROM: Lillian Rios–President  
RE: Gilbert Rios Memorial Award–Community Service Certification

(Print student’s name) \_\_\_\_\_ is an applicant for a Los Padres Foundation Gilbert Rios Memorial Award for graduate studies. One of the requirements to receive this award is that the student must have completed a total of 100 hours of non-faith based community service in each undergraduate year. Please indicate the year(s) and the hours the student volunteered with your organization.

We would appreciate your completing the information below and providing on your organizations letterhead (1) brief description of your organization and (2) the specific work the student did with your organization. If you have any questions, please contact Los Padres Foundation. Please return this form to the student. **The student must have this form on file with us by June 1.** Thank you for your cooperation

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I certify that (Student’s name) \_\_\_\_\_ volunteered

YEAR 1	20____	HOURS_____	YEAR 2	20____	HOURS_____
YEAR 3	20____	HOURS_____	YEAR 4	20____	HOURS_____

Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip-Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-Mail: \_\_\_\_\_  
Supervisor’s Name (print): \_\_\_\_\_  
Supervisor’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_