PINELLAS COUNTY SCHOOLS

BRIGHT FUTURES COMMUNITY SERVICE LOG AND REFLECTION FORM

Hours must be completed by graduation.

Name: _____ Date of Birth: _____

District Student Number: ___ ___ ___ ___ ___ ___ ___ ___ ___ ___ Graduation Year: _____

High School: _____ Name of Agency: _____

Date of Activity	Hours Logged	Date of Activity	Hours Logged

(Add additional logs as needed) Total Hours _____

Florida Bright Futures Community Service Requirements:

FL Academic Scholar : 100 Hours FL Medallion Scholar : 75 Hours FL Gold Seal Vocational Scholar : 30 Hours

_____ _____

Student's Signature Date

_____ _____

Parent's Signature Date

I attest that the above named student has performed the above hours of Community Service.

_____ _____

Agency Contact's Signature Date

Signature below verifies that the log of hours and student evaluation/reflection paper (PCS Form 2-2602-3) have been received and approved.

Signature: _____ Date of Completion: _____

High School Community Service Designee

Signature: _____ Number of hours entered in Focus _____

Hours entered by

Date entered: _____

High School Community Service Designee – Please place the original in the student's cumulative folder.

Students should keep a copy of the completed form that has been signed by the agency for their records.