

"<u>Community Service</u>" is defined as altruistic tasks performed with the intent of enhancing the quality of life in the school or the community at large.

High school students may earn credit for graduation through "<u>approved</u>" community service. Up to one (1) full credit may be earned, one half (1/2) credit at a time, for each 75 hours of <u>pre-approved community</u> <u>service</u>. Students may earn two one-half credits by completing 150 hours of service. Community service hours may only be applied to either coursework for credit or community service for Florida Bright Futures Scholars Awards, not both. A student who seeks one full credit for graduation and the community service for Florida Bright Futures, must complete 225 hours of approved community service activities. *(ACPS policy 2575.01)* 

		Date:				
Stu	dent Name:					
School Name:		Grade Level:				
1.	Name of Agency:					
	Address:					
	Contact Person:	Phone:				
	Signature:					
2.	Name of Agency:					
	Address:					
	Contact Person:	Phone:				
	Signature:					
3.	Name of Agency:					
	Address:					
	Contact Person:	Phone:				
	Signature:					
I understand the requirements and guidelines of the Alachua County Public Schools Community Service Policy and I agree to follow them expl						
Student Signature:		Date:				
sch	mission to Participate: I give my permission for my child to partic ool service program. I have read and understand the guidelines of 75.01) and approve of the volunteer services my child will perform.					
Par	ent Signature:	Date:				
School Counselor Signature:		Date:				

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## **Community Service Volunteer Service Record**

Student Name:		Student Number:			Year of Graduation:			
Parent Name:		Telephone Number(s):						
	I certify that I	have completed the community	service hours listed b	elow.				
Student Signature:		Parent Signature:			Date:			
Date(s) of Service	Description of Service	Organization/Agency	Telephone No.	Hours	Contact Person/Signature			
Please describe below what you learned from your volunteer experience.								
I agree that I have completed the above hours.								

 Student Signature\_\_\_\_\_
 Date\_\_\_\_\_\_

 Parent Signature\_\_\_\_\_
 Date\_\_\_\_\_\_

 High School Representative\_\_\_\_\_\_
 Date\_\_\_\_\_\_