



# SCHOOL DISTRICT OF LEON COUNTY

## Student Services

### RECORD OF COMMUNITY SERVICE HOURS

Student's Name: \_\_\_\_\_ LCS Student ID #: \_\_\_\_\_  
 High School: \_\_\_\_\_ Graduation Year: \_\_\_\_\_  
 Student Phone #: \_\_\_\_\_ Student Email: \_\_\_\_\_  
 Parent Name: \_\_\_\_\_ Parent Phone #: \_\_\_\_\_  
 Parent Email: \_\_\_\_\_

- Students must complete volunteer service hours during high school and by high school graduation. Students can log volunteer service hours starting upon completion of the eighth (8<sup>th</sup>) grade. Volunteer hours earned prior to the student's last day as an eighth (8<sup>th</sup>) grader will not be accepted. The hours must be documented in writing, and signed by the student, the student's parent or guardian, and a representative of the organization.
- Volunteer service hours may include, but are not limited to, a business or governmental internship, work for a nonprofit community service organization, or activities on behalf of a candidate for public office. Students may not receive remuneration or academic credit for the volunteer service work performed.
- Volunteer service hours may not be hours that benefited the student financially or materially, or be service to family members defined as: parents, grandparents, siblings, aunts, uncles, cousins, nieces, nephews, and spouses, including aforementioned step relations.
- Volunteer service hours cannot be hours mandated by the court.

Total Number of Volunteer Hours (from page 2): \_\_\_\_\_

I verify that the hours listed on this log sheet were volunteer hours

Student Signature: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

Received By: \_\_\_\_\_

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

**FOR OFFICE USE ONLY:**

Hours Entered: \_\_\_\_\_

Total Hours in Genesis: \_\_\_\_\_

School Counselor Name

Date

**LCS Verification of Community Volunteer Hours Performed in Grades 9-12  
For the Florida Bright Futures Scholarship Program**

<b><u>FSA – 100 hrs</u></b>	<b><u>FMS = 75 hrs</u></b>	<b><u>GSV = 30 hrs</u></b>
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<b>Date of Activity</b>	<b>Agency/Place of Activity</b>	<b>Duties Performed</b>	<b># Hours Worked</b>	<b>Supervisor Signature</b>
		<b>TOTAL HOURS</b>		

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**Supervisor Name (printed)**                      **Supervisor Email Address**                      **Supervisor Phone #**

**Short Paragraph on “What did you learn from your volunteering experiences?”**