

Voluntary Community Service Plan

Lake County School/East Ridge High School Community Service Project

Student Last Name _____ First Name _____ MI _____

Home Phone Number _____ Cellular Number _____

Sponsoring Agency _____ Address _____ City _____

Date Service Begins _____ On-site Contact _____ Contact Phone Number _____

Lake County Schools and East Ridge High School will provide:

1. Guidelines and project proposal paperwork to assist the student in developing and completing recommended hours of community service.
2. Submit the codes needed on the transcript to indicate student's successful completion of hours when all paperwork is completed and returned to the guidance office.

Student will:

1. Develop a community service program that will require ___ hours of voluntary service.
2. Perform diligently to carry out the task set forth in the developed plan.
3. Take advantage of every opportunity to improve the program as it progresses.
4. Strive to present a positive self image in attitude, dress and actions.
5. Assume the responsibility of providing transportation to and from the site.
6. Record hours and have contact person sign and return completed forms to guidance.
7. Accept the conditions stated in this VPS packet.
8. Agree not to terminate or change volunteer locations without resubmitting a new plan and gaining approval from guidance.
9. Agree to read and adhere to the attached list of rules and regulations.
10. Agree to abide by the rules and regulations of the service agency.

Community Contact will:

1. Assist the student in scheduling hours.
2. Provide student with a completed Community Service Log (see next page) which the student is responsible for submitting to his/her guidance counselor.
3. Abide by the Child Labor Laws regarding hours and equipment.

Student: _____
Signature _____ Date _____

Community Contact: _____
Signature _____ Date _____

Parent/Guardian: _____
Signature _____ Date _____

Guidance Counselor Approval: _____
Signature _____ Date _____

Voluntary Community Service Plan

Student Name: _____

Grade: _____

I. IDENTIFY A SOCIAL PROBLEM – Indicated with an “X” the social problem you plan to address:

- ___ 1. The preservation of the environment and/or the protection of historical sites
- ___ 2. The promotion of the health, welfare and safety of the community
- ___ 3. The improvement of the standard of living for residents of our community
- ___ 4. The encouragement of the growth of the arts in our community
- ___ 5. The improvement/enrichment of the lives of disabled of our community
- ___ 6. The promotion of a quality life for the senior citizens of our community
- ___ 7. The provision of leadership, guidance, & activities for community youth
- ___ 8. High school course-based service learning activities hours
- ___ 9. Other: identify a social problem not covered above - _____

II. WRITTEN PLAN FOR PERSONAL INVOLVEMENT WITH THE ABOVE IDENTIFIED SOCIAL PROBLEM: (50 words or less)

III. MY EVALUATION AND REFLECTION OF THE EXPERIENCE: (100 words or less)

Parent Signature _____ **Date** _____

Student Signature _____ **Date** _____

Counselor Signature _____ **Date** _____

**Voluntary Community Service Plan
Verification of Voluntary Community Service
for Florida Bright Futures Program**

Student Name _____ **School Name** _____

Student Phone _____ **Grade:** _____ **Graduation Date:** _____

DATE OF SERVICE	TOTAL # HOURS Round to nearest ½ hr	SITE OF VOLUNTEER WORK	VERIFIER'S SIGNATURE	VERIFIER'S PHONE NUMBER

TOTAL HOURS = _____ (as verified by site coordinator)
Site Coordinator (signature required) _____
Student Signature _____