Florida Seal of Fine Arts Volunteer Hour Tracker (Form FA-4)

This form is for district use and not to be submitted to the Florida Department of Education.

Student Name: _____ Graduation Year: _____

School: _____ Fine Arts Discipline: Select

Date	Start Time	End Time	Supervisor's Name	Supervisor's Signature	Total Hours
				Total	

Completion of a comprehensive presentation on his or her experiences: Yes ☐ No ☐