

Hours must be completed by graduation. Form must be completed in its entirety. Incomplete forms will not be accepted. Forms should be turned in after student has completed hours with the agency or met the required number of hours for Bright Futures. Students must complete separate forms for each agency.

Name: _____ Date of Birth: _____

District Student Number: _____ Graduation Year: _____

High School: _____ Name of Agency: _____

[illegible]

(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 for a total of _____ hours. These hours were completed beginning on _____ and ending on _____.

Date _____

Date _____

Agency Contact's Signature*

Date _____



PINELLAS COUNTY SCHOOLS
**BRIGHT FUTURES COMMUNITY SERVICE LOG
AND REFLECTION FORM**



Please describe below what you learned from your community service experience.

By signing below, I understand that this is not the application for Bright Futures Scholarships, and that students must complete the Initial Student Florida Financial Aid Application (FFAA) during their last year of high school.

I also understand that Community Service is only one of the requirements for Bright Futures. To find out how to qualify for a Bright Futures Scholarship, I will go to www.FloridaStudentFinancialAid.org/SSFAD/bf to review the requirements.

Student's Signature *

Date

OFFICE USE ONLY: To be completed by PCSB personnel only.

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 and give the student a copy for his/her records.

***This form was completed and digitally signed during the school closures related to COVID 19.**