

RECORD OF COMMUNITY SERVICE HOURS

NAME:					
Нідн School:			GRADUATION YEAR:		
STUDENT'S AD	DRESS:				
Сіту:	Sta	State:Zip Code:		Рноле:	
Date of Activity	Agency/Place of Activity	Nature of Activity	Number of Hours Worked	Signature of Project Supervisor	

TOTAL HOURS REPORTED ON FORM:_____

I attest that I have performed the above listed hours toward the completion of 100 hours of community service for the Bright Futures Florida Academic Scholars Program, or 75 hours for the Bright Futures Merit Scholars Program.