

The Nassau County School District

1201 Atlantic Avenue

Fernandina Beach, Florida 32034

Dr. Kathy Burns

Superintendent of Schools

VOLUNTARY COMMUNITY AND SCHOOL SERVICE PROGRAM

GUIDELINES for NON-CREDIT SERVICE

1. All forms must be submitted to your school guidance counselor before volunteer hours can be documented. Forms to be submitted are:
 - a. Application Form: The student must develop and implement a personal school or community service plan, which has been approved by the individual or agency for which the service is being rendered. The plan should identify the need to be addressed, and the plan for personal involvement.
 - b. Permission to Participate in Voluntary Community and School Service Program signed by parent and **NOTARIZED**.
 - c. Nassau County Voluntary Community and School Service Program Log to be submitted upon completion of service hours.
2. Projects performed by students must be of a non-hazardous nature and occur outside of the school day and may NOT be a result of court action.
3. Voluntary service may be accumulated over the high school years and must be completed by the end of April the senior year for Bright Futures 7th semester eligibility determination.
4. The student may document service work hours during the school year and during the summer.
5. Each student is responsible for documenting specific services performed and provide an anecdotal log to be signed and dated by the supervising agency to certify the hours of service. The Nassau County Voluntary Community and School Service Program Log should be submitted to the school Guidance Counselor upon completion of service hours.
6. It is the students responsibility to make sure that all service work program components are completed and on file.
7. No student shall receive monetary compensation for services rendered.
8. Students should make copies of all forms prior to turning them in to the school Guidance Counselor.

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APPLICATION FORM

VOLUNTARY COMMUNITY AND SCHOOL SERVICE PROGRAM

Student Name _____ Current Grade _____
School _____ Counselor _____

BRIEFLY EXPLAIN THE FOLLOWING:

1. The social problem(s) to be addressed:

2. Your plan for personal involvement:

(Can be accomplished through work with various clubs, agencies or groups)

Student Signature

Date

Parent Signature

Date

Approved by: _____

Individual/Agency

Date

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Permission to Participate in Voluntary Community and School Service Program

I give permission for my child _____, to participate in the Voluntary Community and School Service Program in Nassau County for the _____ School year. I have read and I understand the guidelines and procedures governing this program.

Signature of Parent/Guardian

Date

Notary Signature

Expiration Date

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VOLUNTARY COMMUNITY AND SCHOOL

Student Name _____ School _____

SERVICE ACTIVITY	NUMBER OF HOURS	SUPERVISOR SIGNATURE	DATE

TOTAL HOURS _____

STUDENT SIGNATURE

GUIDANCE COUNSELOR SIGNATURE

DATE

DATE