School for Applied Technology
Miami-Dade County Public Schools giving our students the world
Student's Name I.D.#
School
Grade Level Title of Project
Project Starting Date
 Directions: Complete the Proposal form in ink and sign it. Print clearly or type. Attach additional page(s), as needed. Have the Proposal form signed by a parent or guardian. Submit the Proposal for approval and signature. All students submit the form to the appropriate counselor or the principal's designee.
Project Description - What is your project? Be specific about what you will do.
Need - Why is this project needed? For whom will it be valuable? Final Results - What do you hope to accomplish as result of your work?
I have reviewed my son/daughter's Community Service Project Proposal and understand that a community service project must be completed in order to meet the graduation requirements for Miami-Dade County Public Schools.
Parent/Guardian's Signature
Student's Signature
Signature of approving teacher, counselor, or principal's designee
FM-6586 (08-03)

School for Applied Technology **Activity Log Form**

Student's Name _____ I.D.# _____

School _____

All students must use the Activity Log Form to record their community service activities. **Only students working to meet the requirements for the Florida Academic Scholars certificate or the Superintendent's Diploma of Distinction need to complete the "Hours Completed" section of the Activity Log Form. Use additional sheets, as needed.

Date	Community Service Activities	**Hours Completed

I have reviewed my son/daughter's Activity Log Form and understand that a Community Service Project must be completed in order to meet the graduation requirements for Miami-Dade County Public Schools.

Parent/Guardian's Signature ______ **Total Project Hours _____

Student's Signature

Signature of teacher, counselor, or principal's designee _____

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