

Town of Franconia Request for Volunteer

Department: _____

Actual Work Location: _____

Supervisor: _____

Volunteer Job Title: _____

Purpose: _____

Responsibilities: _____

Length of Appointment: _____

Time Commitment: _____

Qualifications: _____

Training: _____

Will volunteer be operating a municipal vehicle: Yes No (circle one) Will volunteer be operating municipal equipment: Yes No (circle one) If yes, please describe:

Additional comments:

Volunteer Signature & Date: _____

Supervisor Signature & Date: _____

Volunteer Letter of Agreement

I, _____, accept this assignment to volunteer on behalf of

The Town of Franconia in the following:

Department: _____

Position: _____

I will participate in my volunteer orientation/training in my assigned department as noted below:

Date: _____ Time: _____

Location: _____

I will volunteer from (dates): _____ to: _____.

In case of emergency, please contact:

Phone number: _____ Relationship to volunteer: _____

As a volunteer, I agree to do the following:

1. Learn and adhere to the department's policies as they relate to my assignment.
2. Participate in a performance evaluation program.
3. Perform duties according to the job description.

The Town of Franconia agrees to provide the following:

1. A supervisor to help meet the needs and be responsible for problems or concerns
2. A written job description.
3. Training opportunities when possible.
4. Consultation with volunteer to evaluate performance.
5. An opportunity for continuous and various service when possible.

I agree to the schedule and will notify my supervisor if other arrangements need to be made.

I fully understand that if my services are no longer needed, or my performance is not acceptable, the Town of Franconia has the right to terminate my services as required and without notice. During my volunteer services with the department, I agree to assume full responsibility for such participation and release the Town of Franconia from any damages which I may sustain. I agree to refrain from repeating to any outside source and to keep confidential all information or records pertaining to participants/residents/employees obtained while I am a volunteer for the Town of Franconia.

Name (please print):

Signature: _____ Date: _____