

Volunteer Agreement

Date:

Dear (volunteer's name):

Thank you for volunteering your services to our department. The following is a summary of your assignment:

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You will receive training on this assignment and feedback may be given to you on your performance. As a volunteer, there is no compensation for your services.

Your work schedule will be: _____
from _____ to _____. (dates)

Special requirements of serving as a volunteer in our department (such as specific skills the person must possess, driver's license and insurable driving record, dress code, etc.)
are: _____
_____.

Please contact me with any questions concerning your service as a volunteer.

Please review the attached Volunteer Information Sheet, which is provided to summarize important policies that govern your volunteer service.

Sincerely,

Name of Supervisor:

Signature of Supervisor:

Title:

I have read and understand the above information and I agree to the terms of this volunteer assignment and I intend to provide my services solely as a volunteer. I agree to abide by the policies and procedures of the VCCS, NOVA, and state and federal law listed on the Volunteer Information Sheet.

Signature: _____ Date: _____

Email address _____ Phone Number _____

_____ Date: _____

Signature of Parent or Guardian (If volunteer is under 18)

HR Approval _____ Date: _____