

TOWN OF WILSON VOLUNTEER APPLICATION

Name: _____ Phone: _____ Date: _____

Address: _____ Email: _____

AREAS OF INTEREST:

- General Maintenance (paint/stain picnic tables, signs and posts, small repairs; perform light work)
- Park Beautification (pick up trash, perform light cleaning)
- Landscaping (leaf pick-up, raking, gardening)
- Conservation (natural area maintenance and restoration, tree maintenance, gardening)
- Invasive Species (pulling/cutting, treating)
- Trails (maintenance, mowing, trimming, brushing, sign maintenance)

Statement of Availability:

- Days of the week:
- Time of day:
- Number of hours you are willing to donate: _____ Weekly/Monthly

Reason for Volunteering:

- Desire to Help out
- Requirement for Club/Group
- School Assignment (Give supervisor's name)
- Earning Scout Award
- Other

FOR OFFICE USE ONLY

Assigned to:

Training Record:

Task Orientation Required	Date Completed
Safety Orientation Required	Date Completed
Small Equipment Operation	Date Completed
Personal Protective Equipment Training Required	Date Completed
Volunteer Agreement Signed	Date Completed

VOLUNTEER AGREEMENT, Town of Wilson

Name: _____ Job Title: _____

Address: _____ City: _____ State: ____ Zip Code: _____

Daytime Phone _____ Cell Phone _____ Email _____

Emergency Contact and Relationship: _____ Phone: _____

Dates of Agreement: _____ Hours per Week: _____ Schedule: _____
From: _____ To: _____

Volunteer Location: TOWN OF WILSON Site: TOWN OF WILSON

Address: 5935 S. Business Dr., Sheboygan, WI 53081

Volunteer Supervisor's Name: _____ Title: _____ Date: _____

This agreement for volunteer services is entered into by and between the volunteer and the Town named above. The volunteer and the Town mutually agree to the following responsibilities:

The Volunteer:

1. Will be under the supervision, direction and control of the supervisor named above.
2. Shall be available for scheduled service times(s) named above.
3. Understands that s/he is a volunteer and NOT an employee of the Town of Wilson and NOT eligible for benefits, including Worker's Compensation.
4. Understand all duties to be performed that appear on the Position Description or according to instructions from the Supervisor and that duties may change.
5. Understands all work rules that are to be followed.
6. Understands that the Town of Wilson will provide NO compensation.
7. Understands that equipment may be operated with appropriate training but that no Town owned vehicles will be driven.

The Town of Wilson:

1. Will provide the volunteer with a Position Description describing the duties to be performed.
2. Will provide training required to perform the assigned duties.
3. Will educate volunteers on safety procedures to be followed.
4. Will provide the volunteer with the safety equipment that is needed.
5. Will subsequently and periodically review the work that the volunteer performs.
6. Will regard the volunteer as an agent of the Town as provided in s. 895.46, Wis. Stats. As such the volunteer will be entitled to all the protections that s. 895.46, provides.
7. Will review and update this Volunteer Agreement at least annually.

Either the volunteer or the Town of Wilson may cancel this agreement at any time.

Volunteer Signature: _____ Date: _____

Authorized Supervisor Signature: _____ Date: _____