

AGREEMENT FOR SPONSORED VOLUNTARY SERVICES

1. Name of Sponsor/Organization (*Print*)

2. Address (*Street, City, State, ZIP Code*)

3. We desire to make available the volunteer services of the following person(s) to assist with the Forest Service work. (*If more space is needed, use reverse*)

4. Description of work to be performed:

5. The above-described work will be contributed to the Forest Service. Except as provided below, the work performed by the participants will not confer on them or on our employees, or officers, the status of federal employees.

6. We will provide the Forest Service with a list of participants and man-hours contributed to accomplish the work in item 4 above.

7. We will obtain parental or guardian consent for each individual under 18 years of age and will comply with child labor laws.

8. _____ is hereby designated to serve as our liaison with the Forest Service in day-to-day operations under this agreement.

9. We understand that either the Forest Service, or we, may cancel this agreement at any time by notifying the other party.

10. Remarks: (*If more space is needed, use reverse*)

Signature (*Designated Liaison for Sponsored Group/Organization*)

Date

The Forest Service agrees, while this agreement is in effect, to:

1. Provide such materials, equipment, and facilities as are available and needed in performing the work described above.
2. Provide necessary incidental expenses of sponsored participants to the extent such expenses cannot be borne by the sponsor, and to the extent Forest Service funds are available. The maximum Forest Service funding of such incidental expenses shall be set forth on the reverse of this form or in an accompanying plan for each fiscal year or portion of a fiscal year.
3. Consider the participants as federal employees for the purpose of tort claims and compensation for work injuries, to the extent not covered by the sponsor.
4. Authorize sponsored participants to operate federal motor vehicles when necessary, provided participants are licensed to operate a motor vehicle.

5. Signature (*Forest Service Officer*)

6. Title

7. Unit

8. Date

Forest Service reimbursement for sponsored participant's necessary incidental expenses are as follows:

- | | | | | |
|-----------------------------|--------------------------|--------------------------|--------------------------------|----------------|
| | Yes | No | | |
| a. Subsistence | <input type="checkbox"/> | <input type="checkbox"/> | (<i>amount if yes</i>) _____ | remarks: _____ |
| b. Transportation Allowance | <input type="checkbox"/> | <input type="checkbox"/> | (<i>rate if yes</i>) _____ | remarks: _____ |
| c. Provide Lodging | <input type="checkbox"/> | <input type="checkbox"/> | remarks: _____ | |
| d. Other: _____ | | | | |

TERMINATION OF AGREEMENT

1. Agreement Terminated on *(Month, Day, Year)*

2. Signature *(Forest Service Officer)*

3. Remarks:

ACCOMPLISHMENT *

| RESOURCE CATEGORY (a) | NIRP CODE (b) | UNIT OF MEASURE (c) | AMOUNT ACCOMP. (d) | HOURS CONTR. (e) | COST TO GOVMT (f) | APPRAISED VALUE (DOLLARS) (g) |
|--------------------------|---------------------|---------------------------|--------------------------|------------------------|-------------------------|-------------------------------------|
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Additional Space *(Please specify the section and item no. using this space):*

* Collection of Accomplishment information on this form is optional.