VOLUNTEER AGREEMENT FOR					
APPROPRIATED	FUND ACT	IVITIES	NONAPPROPRIATED FUND INSTRUMENTALITIES		
PART I - GENERAL INFORMATION					
1. TYPED NAME OF VOL	UNTEER (Last, F	First, Middle In	itial)		2. YEAR OF BIRTH
3. INSTALLATION 4. ORGANIZATION/UNIT WHERE					ERVICE OCCURS
5. PROGRAM WHERE SE	RVICE OCCUR	:S		6. ANTICIPATED DAYS OF WEEK	7. ANTICIPATED HOURS
8. DESCRIPTION OF VOLUNTEER SERVICES					
PART II - VOLUNTEER IN APPROPRIATED FUND ACTIVITIES					
Government or any instr performance of approve arising out of legal malp benefits for these volunt agree to participate in ar	umentality the d volunteer se ractice. I exprary services. In training req	reof, exceptivities, tort essly agree to builties to builties to be uired by the	ot for certain purpo claims, the Privace that I am neither be bound by the la e installation or un	nteer and that I will not be an employees relating to compensation for in by Act, criminal conflicts of interest, entitled to nor expect any present was and regulations applicable to voit in order for me to perform the vol	juries occurring during the and defense of certain suits or future salary, wages, or other lluntary service providers and untary services that I am
offering. I agree to follow all rules and procedures of the installation or unit that apply to the voluntary services I will be providing.					
a. SIGNATURE OF VOLUNTEER					b. DATE SIGNED (YYYYMMDD)
10.a. TYPED NAME OF ACCE (Last, First, Middle Initial)		-	b. SIGNATURE		c. DATE SIGNED (YYYYMMDD)
PART III - VOLUNTEER IN NONAPPROPRIATED FUND INSTRUMENTALITIES					
I expressly agree that my services are being provided as a volunteer and that I will not be an employee of the United States Government or any instrumentality thereof, except for certain purposes relating to compensation for injuries occurring during the performance of approved volunteer services and liability for tort claims as specified in 10 U.S.C. Section 1588(d)(2). I expressly agree that I am neither entitled to nor expect any present or future salary, wages, or other benefits for these voluntary services. I agree to be bound by the laws and regulations applicable to voluntary service providers, and agree to participate in any training required by the installation or unit in order for me to perform the voluntary services that I am offering. I agree to follow all rules and procedures of the installation or unit that apply to the voluntary services that I am offering.					
a. SIGNATURE OF VOLUNTEER					b. DATE SIGNED (YYYYMMDD)
12.a. TYPED NAME OF ACCEPTING OFFICIAL (Last, First, Middle Initial)			b. SIGNATURE		c. DATE SIGNED (YYYYMMDD)
PART IV - TO BE COMPLETED AT END OF VOLUNTEER'S SERVICE BY VOLUNTEER SUPERVISOR					
a. YEARS (2,087 hours=1 year) b. WEE	EER TIME DON	d. Hours	14. SIGNATURE		15. TERMINATION DATE (YYYYMMDD)
16.a. TYPED NAME OF SUPERVISOR (Last, First, Middle Initial)			b. SIGNATURE		c. DATE SIGNED (YYYYMMDD)