

Volunteer Staff Use Only							
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Volunteer Request Form

Date of Request:					
Supervisor:	Phone	Phone:			
Volunteer Project/Event:					
Volunteer Work Site: ☐ Ci	ity Hall 🔲 C	ther (Specify)	-		
Type of Volunteer Request		r, ongoing position ular, ongoing position			
Days of the Week Needed:		V □ Th □F [⊐Sa □Flexible	;	
Days/Hours Preferred:	Prefe	rred Project Date):		
Number of Volunteers Needed	for this Position/Projec	t:			
 If this is a special project, a If this is a mailings project, Volunteers will be □ C □ Labeling □ Sor 	mplete the following: Greeting U ttach a brief description complete the following Collating Greeting Assemblin	shering	lling tickets r responsibilities eces in the proje Stuffing En her (Specify belo	Registration ct: velopes ow)	
Requester:(If different that	ın Volunteer Superviso		:		
Signature	•	.,			
of Department Head:		Date:			
 Please allow at least 6 weeks f position request to be filled. Please allow 1-2 weeks for mabe filled. 	uiling requests to	 Please allow at least 2 weeks for special event requests. Time needed to fill special project requests will vary according to the request. 			
Please return form to:	Volunteer Services City Hall 3400 Plymouth Boulevard				

Plymouth, MN 55447

763-509-5230 or email to Volunteer@ci.plymouth.mn.us

July 2007