

# VOLUNTEER ASSIGNMENT AGREEMENT



Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Are you 14 years of age or older?  Yes  No

**Volunteers must have health insurance.** The Maine Conservation Corps provides a SERVE/Maine accident policy for those volunteers over 14 years of age without their own insurance. If volunteers have their own insurance, there is no age requirement for volunteering with MCC.

**Do you currently have health insurance?**

**Yes** Please name your Insurance Company: \_\_\_\_\_

**No** I accept Maine Conservation Corps' SERVE/Maine accident plan

In case of emergency, notify: \_\_\_\_\_ Telephone number: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_

**Yes**  **No** I consent for the Maine Conservation Corps to use my name and photographs for publicity, promotional, reporting, and other purposes related to the program.

\_\_\_\_\_  
Volunteer signature (If under 18, signature of parent or guardian)

\_\_\_\_\_  
Date

**Maine Conservation Corps** is very pleased to welcome you as a volunteer.

## VOLUNTEER FEEDBACK SURVEY

Project Name \_\_\_\_\_ Leader(s) \_\_\_\_\_

Are you:  under 18  college student  baby boomer (b. 1946-1964)  veteran  other \_\_\_\_\_

Are you:  New MCC Volunteer  Returning MCC Volunteer  MCC Alum (select all that apply)

How many hours did you volunteer? \_\_\_\_\_ hrs over \_\_\_\_\_ day(s) Date(s) of Service \_\_\_\_\_

What did you do? \_\_\_\_\_

Was your volunteer experience a positive one?  Yes  No

Was the orientation to the project adequate?  Yes  No How did you hear about our program? \_\_\_\_\_

What did you gain from your experience? \_\_\_\_\_

Suggestions for improvement: \_\_\_\_\_

Why did you volunteer?  Assist with the project  Learn new skills Other: \_\_\_\_\_

Would you volunteer with the MCC again?  Yes  No

**Thank you! Your feedback is essential to the continuation and improvement of our program.**

## **Maine Conservation Corps (MCC) Volunteer Card Instructions :**

1. Print your MCC Volunteer Card.
2. Fill out the Volunteer Assignment Agreement (top half of page) and be sure to sign and date.
3. Upon arriving at your MCC project/event, give your Volunteer Card to the MCC Member leading the project/event.
4. After volunteering, the MCC member leading the project/event will return your Volunteer Card. Please complete the survey portion (lower half) of the Volunteer Card.

While this information may seem insignificant, we must obtain and report this information to maintain our AmeriCorps program funding. *Thank you for your help with this!*

**Thank you for volunteering with the MCC !**

Please note : If you are over 14 and do not have health insurance, you may sign up for our SERVE/Maine accident plan; if you are under 18, the Volunteer Assignment Agreement must be signed by a parent or guardian.