

**GROUP (SPONSORED) VOLUNTEER SERVICES AGREEMENT**

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 Bureau of Reclamation work at the following Office(s):

4. Description of work to be performed (If more space is needed, use reverse):

5. The above-described work will be contributed to the Bureau of Reclamation. Except as provided below, the work performed by the participants will not confer on them or on our employees, or officials, the status of Federal employees.

6. We will provide the Bureau of Reclamation with a list of participants and person-hours contributed to accomplish the work in Item 4 above.

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

8. \_\_\_\_\_ is hereby designated to serve as our liaison with the Bureau of Reclamation in day-to-day operations under this agreement.

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

10. Remarks

11. Signature (Designated Liaison for Sponsored Group/Organization)

12. Date

**ACCEPTANCE FOR THE BUREAU OF RECLAMATION**

The Bureau of Reclamation 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 Reclamation funds are available. The maximum Reclamation 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 physical 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 participant(s) have been issued a U.S. Government Motor Vehicle Operator's Identification Card.

5. Signature (Reclamation Official)

7. Office

6. Title

8. Date

**GROUP (SPONSORED) VOLUNTEER SERVICE AGREEMENT, Continued**

Bureau of Reclamation reimbursement for sponsored participants' necessary incidental expenses are as follows:

- |                    | Yes                      | No                       |                        |                |
|--------------------|--------------------------|--------------------------|------------------------|----------------|
| a. Incidentals     | <input type="checkbox"/> | <input type="checkbox"/> | (Amount, If Yes) _____ | Remarks: _____ |
| b. Mileage         | <input type="checkbox"/> | <input type="checkbox"/> | (Rate, If Yes) _____   | Remarks: _____ |
| c. Provide Lodging | <input type="checkbox"/> | <input type="checkbox"/> | Remarks: _____         |                |
| d. Other           | <input type="checkbox"/> | <input type="checkbox"/> |                        |                |

**TERMINATION OF AGREEMENT**

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

2. Signature (Volunteer Coordinator)

3. Remarks:

**ACCOMPLISHMENT**

Work Category	Unit of Measure	Amount Accomplished	Hours Contributed	Cost to Government	Appraised Value (Dollars)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					