P.O. BOX 176

TEMPORARY VOLUNTEER WORK AGREEMENT JEFFERSON CITY, MO 65102					
I. VOLUNTEER INFORMATION (PLEASE PRINT)					
VOLUNTEER NAME			DATE OF BIRTH		
MAILING ADDRESS	CITY		STATE	ZIP CODE	
TELEPHONE NUMBER		PARK/SITE			
TELEFIIONE NOWIDEN		PARROTTE			
STARTING DATE	ENDNG DATE		TOTAL HOURS WORKED		
II. PERFORMANCE GUIDELINES					
The volunteer is expected to: follow department and division rules and policies, support the mission of the department and division, work with other division staff in a cooperative manner, report any problems or issues to division staff on a timely basis, only carry out authorized responsibilities and exercise proper case in performing all volunteer activities. III. TASKS AND ACTIVITIES		The division is expected to provide: management and staff to work with the volunteer, necessary training for the responsibilities assigned the volunteer, and, a receptive work environment.			
DESCRIPTION OF ASSIGNMENT					
IV. AGREEMENT					
IV. AGILLIVILIVI					
By signature below, I acknowledge that I have read this form completely and agree to voluntarily accept the risks connected with these activities. I further agree to release and hold harmless the Missouri Department of Natural Resources and its employees from any and all liability, including injury or expect future compensation or favor for being a volunteer. This agreement in no way constitutes an offer of employment; therefore, I understand that the Missouri Department of Natural Resources, Division of State Parks does not provide worker's compensation.					
SIGNATURE OF VOLUNTEER			DATE		
GOWNER OF VOLUNTEEN			5.112		
CIONATURE OF CTATE DADI/OTE EARD OVER			DATE		
SIGNATURE OF STATE PARK/SITE EMPLOYEE			DATE		
SIGNATURE OF AUTHORIZED GUARDIAN (IF UNDER THE AG	E OF 18)		DATE		