VOLUNTEER IN-PROCESSING AND PAPERWORK

Heather Burke
HQUSACE National Partnerships and
Volunteer Program Manager

13 February 2026

U.S. ARMY

US Army Corps of Engineers®

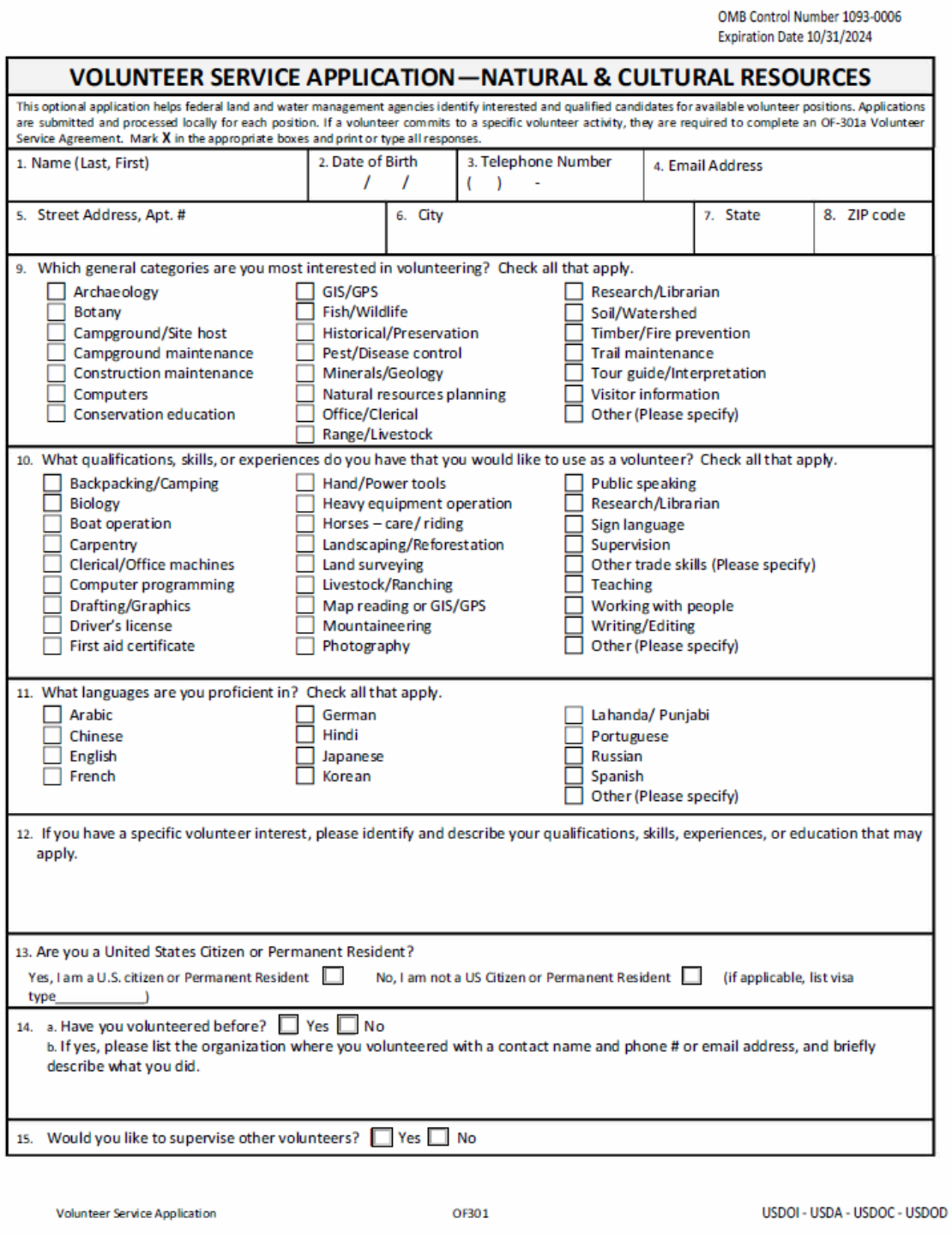
U.S. ARMY

OF 301 Forms

OF 301: Volunteer Application (Approved by OMB for all agency use. NOTE: We have approval from OMB to keep using the 10/31/24 expiration dated forms)

- Designed to gather pertinent information on a potential volunteer's background and areas of interest and skills.
- It can be used to screen applicants, to develop a file of potential volunteers or to refer volunteers to other projects or agencies.
- *It is not required for potential volunteers to fill out a OF 301*

https://corpslakes.erdc.dren.mil/employees/volunteer/forms.cfm



OMB Control Number 1093-0006
Expiration Date 10/31/2024

VOLUNTEER SERVICE APPLICATION—NATURAL & CULTURAL RESOURCES

This optional application helps federal land and water management agencies identify interested and qualified candidates for available volunteer positions. Applications are submitted and processed locally for each position. If a volunteer commits to a specific volunteer activity, they are required to complete an OF-301a Volunteer Service Agreement. Mark **X** in the appropriate boxes and print or type all responses.

1. Name (Last, First)	2. Date of Birth / /	3. Telephone Number ( ) -	4. Email Address

5. Street Address, Apt. #	6. City	7. State	8. ZIP code

9. Which general categories are you most interested in volunteering? Check all that apply.

☐ Archaeology ☐ Botany ☐ Campground/Site host ☐ Campground maintenance ☐ Construction maintenance ☐ Computers ☐ Conservation education
☐ GIS/GPS ☐ Fish/Wildlife ☐ Historical/Preservation ☐ Pest/Disease control ☐ Minerals/Geology ☐ Natural resources planning ☐ Office/Clerical ☐ Range/Livestock
☐ Research/Librarian ☐ Soil/Watershed ☐ Timber/Fire prevention ☐ Trail maintenance ☐ Tour guide/Interpretation ☐ Visitor information ☐ Other (Please specify)

10. What qualifications, skills, or experiences do you have that you would like to use as a volunteer? Check all that apply.

☐ Backpacking/Camping ☐ Biology ☐ Boat operation ☐ Carpentry ☐ Clerical/Office machines ☐ Computer programming ☐ Drafting/Graphics ☐ Driver's license ☐ First aid certificate
☐ Hand/Power tools ☐ Heavy equipment operation ☐ Horses – care/ riding ☐ Landscaping/Reforestation ☐ Land surveying ☐ Livestock/Ranching ☐ Map reading or GIS/GPS ☐ Mountaineering ☐ Photography
☐ Public speaking ☐ Research/Librarian ☐ Sign language ☐ Supervision ☐ Other trade skills (Please specify) ☐ Teaching ☐ Working with people ☐ Writing/Editing ☐ Other (Please specify)

11. What languages are you proficient in? Check all that apply.

☐ Arabic ☐ Chinese ☐ English ☐ French
☐ German ☐ Hindi ☐ Japanese ☐ Korean
☐ Lahanda/ Punjabi ☐ Portuguese ☐ Russian ☐ Spanish ☐ Other (Please specify)

12. If you have a specific volunteer interest, please identify and describe your qualifications, skills, experiences, or education that may apply.

13. Are you a United States Citizen or Permanent Resident?

Yes, I am a U.S. citizen or Permanent Resident ☐ No, I am not a US Citizen or Permanent Resident ☐ (if applicable, list visa type_____)

14. a. Have you volunteered before? ☐ Yes ☐ No
b. If yes, please list the organization where you volunteered with a contact name and phone # or email address, and briefly describe what you did.

15. Would you like to supervise other volunteers? ☐ Yes ☐ No

Volunteer Service Application OF301 USDOI - USDA - USDOC - USDOD

U.S. ARMY

NOTE: Mandarin version will not be replaced in the update.

OMB 控制号 1093-0006
终止日期 10/31/2024

志愿者服务申请--自然和文化资源

该可选的申请帮助联邦土地和水管理机构为现有的志愿者职位确定感兴趣和合格的候选人。每个职位的申请都在当地提交和处理。如果志愿者承诺参加特定的志愿活动，他们需要填写 OF-301a 志愿者服务协议。在适当的方框内打 X，并打印或打出相应的内容。

1. 姓名（姓，名）	2.出生日期 / /	3.电话号码 ( ) -	4.电子邮件地址
5.街道地址，公寓 #	6.城市	7.州	8.邮政编码

9.您对哪些一般类别的志愿服务最感兴趣？请勾选所有适用项。

☐考古学	☐ GIS/GPS	☐研究/图书馆员
☐植物学	☐鱼类/野生动物	☐土壤/分水岭
☐营地/现场主持	☐历史/保护	☐木材/火灾预防
☐营地维护	☐虫害/疾病控制	☐路径维护
☐建筑维护	☐矿物/地质学	☐导游/解说
☐计算机	☐自然资源规划	☐游客信息
☐保护教育	☐办公室/文职	☐其他（请注明）
	☐牧场/牲畜	

10.您有什么资格、技能或经验，希望作为志愿者使用？请勾选所有适用项。

☐背包旅行/露营 生物学	☐手动/电动工具	☐公共演讲
☐船只操作	☐重型设备操作	☐研究/图书馆员
☐木工	☐马匹-护理/骑马	☐手语
☐文职/办公机器	☐景观设计/植树造林	☐监督
☐计算机编程	☐土地测量	☐其他行业技能（请注明）
☐制图/图形学	☐牲畜/放牧	☐教学
☐驾驶执照	☐地图阅读或 GIS/GPS	☐与人打交道
☐急救证书	☐登山摄影	☐写作/编辑
		☐其他（请注明）

11.您熟练掌握哪些语言？请勾选所有适用项。

☐阿拉伯语	☐德语	☐拉汉达语/旁遮普语
☐中文	☐印地语	☐葡萄牙语
☐英语	☐日语	☐孟加拉语
☐法语	☐韩语	☐西班牙文
		☐其他（请注明）

12.如果您有具体的志愿者兴趣，请确定并描述您可能适用的资格、技能、经验或教育。

13.您是美国公民或永久居民吗？
是，我是美国公民或永久居民 ☐ 否，我不是美国公民或永久居民
☐ （如果选择，请列出签证类型_____）

14. a.您以前是否做过志愿者？☐是☐否
b. 如果是，请列出所参加志愿服务的组织，并注明联系人姓名、电话或电子邮件地址，并简要描述自己的工作。

15.您是否愿意监督其他志愿者？☐是☐否

志愿服务申请 OF301 USDOI - USDA - USDOC - USDOD

Número de Control OMB 1093-0006
Fecha de vencimiento 31/10/2024

SOLICITUD DE SERVICIO VOLUNTARIO - RECURSOS NATURALES Y CULTURALES

Esta solicitud opcional ayuda a los agencias federales de manejo de tierras y aguas a identificar a los candidatos interesados y calificados para los puestos de voluntariado disponibles. Las solicitudes se presentan y procesan localmente para cada puesto. Si un voluntario se compromete a realizar una actividad específica de voluntariado, debe completar un Acuerdo de Servicio Voluntario OF-301a. Marque con una X las casillas correspondientes y escriba a máquina o con letra de molde todas las respuestas.

1. Nombre (Apellido, Nombre)	2. Fecha de nacimiento / /	3. Teléfono ( ) -	4. Dirección de correo electrónico
5. Dirección, Calle, Número de Departamento	6. Ciudad	7. Estado	8. Código Postal

9. ¿Qué categorías generales le interesan más como voluntario? Marque todas las que correspondan.

☐ Arqueología	☐ GIS/GPS	☐ Investigación/Bibliotecario
☐ Botánica	☐ Pesca/Vida salvaje	☐ Suelos/Cuenca hidrográfica
☐ Anfitrión de campamento/lugar	☐ Historia/Conservación	☐ Madera/Prevención de incendios
☐ Mantenimiento de campamento	☐ Control de plagas/Enfermedades	☐ Mantenimiento de senderos
☐ Mantenimiento de construcción	☐ Minerales/Geología	☐ Guía turístico/Interpretación
☐ Computadoras	☐ Planeación de recursos naturales	☐ Información al visitante
☐ Educación para la conservación	☐ Oficina/Clerical	☐ Otros (Por favor especifique)
	☐ Pastizales/Ganadería	

10. ¿Qué calificaciones, habilidades o experiencias tiene que le gustaría usar como voluntario? Marque todas las que correspondan.

☐ Excursiones/Salir de campamentos	☐ Herramientas manuales/eléctricas	☐ Oratoria
☐ Operación de botes	☐ Operación de maquinaria pesada	☐ Investigación/Bibliotecario
☐ Carpintería	☐ Cuidar/Montar caballos	☐ Lenguaje de señas
☐ Maquinaria de oficina	☐ Paisajismo/Reforestación	☐ Supervisión
☐ Programación informática	☐ Topografía del terreno	☐ Otros oficios (Por favor especifique)
☐ Dibujo/Gráficos	☐ Ganado/Ganadería	
☐ Licencia de manejo	☐ Lectura de mapas o GIS/GPS	☐ Enseñanza
☐ Certificado de primeros auxilios	☐ Fotografía de montañismo	☐ Trabajo con personas
		☐ Escritura/Edición
		☐ Otros (Por favor especifique)

11. ¿Qué idiomas domina? Marque todas las que correspondan.

☐ Árabe	☐ Alemán	☐ Lahanda/ Punjabi
☐ Chino	☐ Hindi	☐ Portugués
☐ Inglés	☐ Japonés	☐ Ruso
☐ Francés	☐ Coreano	☐ Español
		☐ Otros (Por favor especifique)

12. Si tiene un interés específico como voluntario, por favor identifique y describa sus calificaciones, habilidades, experiencias o educación que puedan aplicarse.

13. ¿Es usted ciudadano estadounidense o residente permanente?
Sí, soy ciudadano estadounidense o residente permanente ☐ No, no soy ciudadano estadounidense ni residente permanente
☐ (si procede, indique el tipo de visa _____)

14. a. ¿Ha sido voluntario anteriormente? ☐ Si ☐ No
b. En caso afirmativo, por favor, indique la organización en la que ha trabajado como voluntario con un nombre de contacto y un número de teléfono o una dirección de correo electrónico, y describa brevemente lo que ha hecho.

15. ¿Le gustaría supervisar a otros voluntarios? ☐ Si ☐ No

Solicitud de Servicio Voluntario OF301 USDOI - USDA - USDOC - USDOD

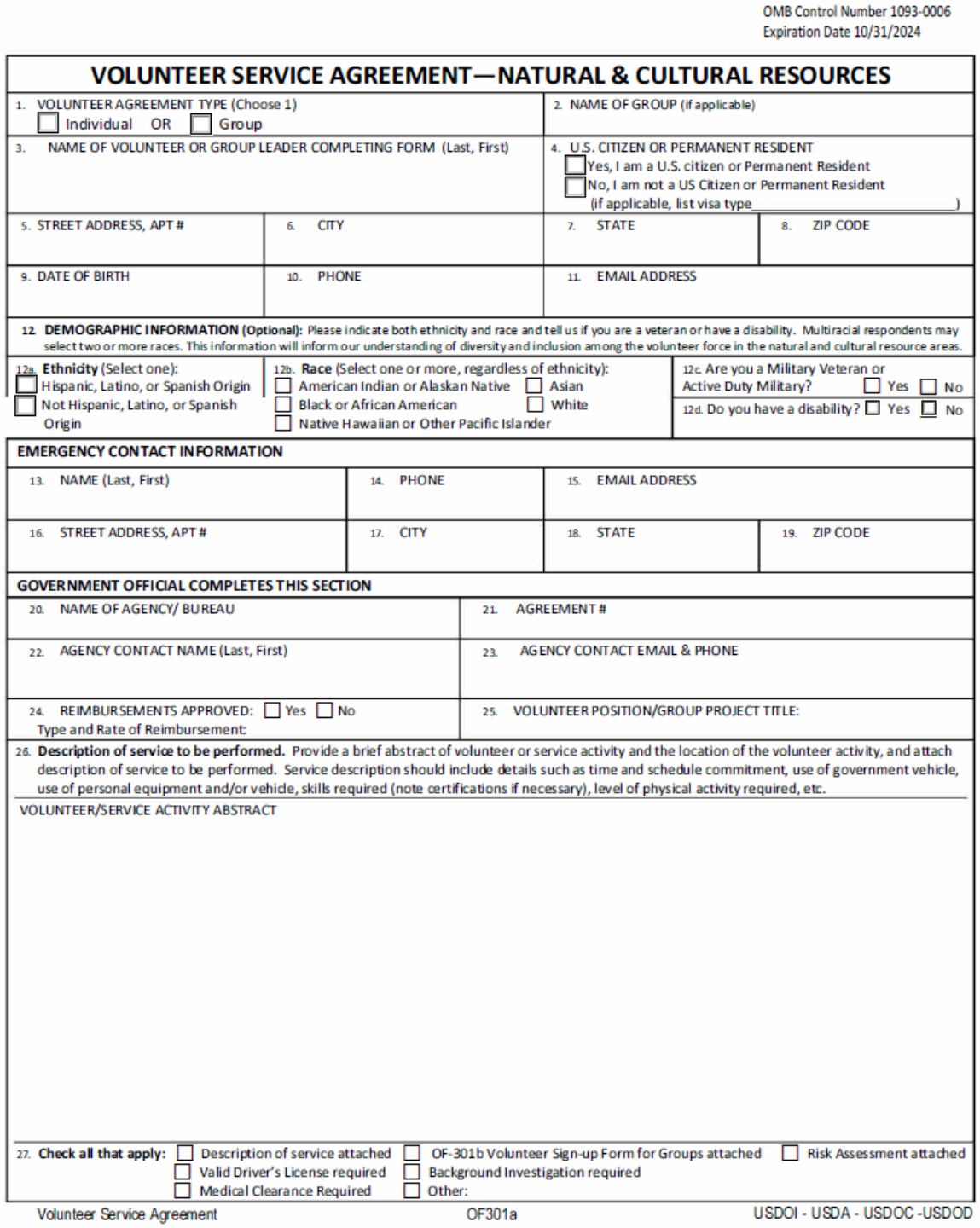
https://corpslakes.erdc.dren.mil/employees/volunteer/forms.cfm

OF 301 Forms

OF 301a: Volunteer Agreement (Approved by OMB for all agency use)

Volunteers must sign an OF 301a, which documents acknowledgement of their understanding of the scope of volunteer duties, benefits and protections afforded to them as volunteers.

https://corpslakes.erdc.dren.mil/employees/volunteer/forms.cfm



OMB Control Number 1093-0006
Expiration Date 10/31/2024

VOLUNTEER SERVICE AGREEMENT—NATURAL & CULTURAL RESOURCES

1. VOLUNTEER AGREEMENT TYPE (Choose 1) ☐ Individual OR ☐ Group
2. NAME OF GROUP (if applicable)
3. NAME OF VOLUNTEER OR GROUP LEADER COMPLETING FORM (Last, First)
4. U.S. CITIZEN OR PERMANENT RESIDENT ☐ Yes, I am a U.S. citizen or Permanent Resident ☐ No, I am not a US Citizen or Permanent Resident (if applicable, list visa type_____)
5. STREET ADDRESS, APT #
6. CITY
7. STATE
8. ZIP CODE
9. DATE OF BIRTH
10. PHONE
11. EMAIL ADDRESS

12. **DEMOGRAPHIC INFORMATION (Optional):** Please indicate both ethnicity and race and tell us if you are a veteran or have a disability. Multiracial respondents may select two or more races. This information will inform our understanding of diversity and inclusion among the volunteer force in the natural and cultural resource areas.

12a. **Ethnicity** (Select one): ☐ Hispanic, Latino, or Spanish Origin ☐ Not Hispanic, Latino, or Spanish Origin

12b. **Race** (Select one or more, regardless of ethnicity): ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ White ☐ Native Hawaiian or Other Pacific Islander

12c. Are you a Military Veteran or Active Duty Military? ☐ Yes ☐ No

12d. Do you have a disability? ☐ Yes ☐ No

EMERGENCY CONTACT INFORMATION

13. NAME (Last, First)
14. PHONE
15. EMAIL ADDRESS
16. STREET ADDRESS, APT #
17. CITY
18. STATE
19. ZIP CODE

GOVERNMENT OFFICIAL COMPLETES THIS SECTION

20. NAME OF AGENCY/ BUREAU
21. AGREEMENT #
22. AGENCY CONTACT NAME (Last, First)
23. AGENCY CONTACT EMAIL & PHONE
24. REIMBURSEMENTS APPROVED: ☐ Yes ☐ No Type and Rate of Reimbursement:
25. VOLUNTEER POSITION/GROUP PROJECT TITLE:

26. **Description of service to be performed.** Provide a brief abstract of volunteer or service activity and the location of the volunteer activity, and attach description of service to be performed. Service description should include details such as time and schedule commitment, use of government vehicle, use of personal equipment and/or vehicle, skills required (note certifications if necessary), level of physical activity required, etc.

VOLUNTEER/SERVICE ACTIVITY ABSTRACT

27. **Check all that apply:** ☐ Description of service attached ☐ OF-301b Volunteer Sign-up Form for Groups attached ☐ Risk Assessment attached ☐ Valid Driver's License required ☐ Background Investigation required ☐ Medical Clearance Required ☐ Other:

Volunteer Service Agreement OF301a USDOI - USDA - USDOC -USDOD

U.S. ARMY

NOTE: Mandarin version will not be replaced in the update.

OMB 控制号 1093-0006
终止日期 10/31/2024

志愿者服务协议–自然与文化资源

1. 志愿者协议类型（选择 1） ☐个人☐团体		2.团体名称（如适用）	
3.填写表格的志愿者或团体负责人的姓名（姓，名）		4.美国公民或永久居民 ☐是，我是美国公民或永久居民 ☐否，我不是美国公民或永久居民 （如果选择，请列出签证类型 _____）	
5.街道地址，公寓号码	6.城市	7.州	8.邮政编码
9.出生日期	10.电话	11.电邮地址	

12.人口统计信息（可选）：请注明民族和种族，并告诉我们您是否是退伍军人或有残疾。多种族的受访者可以选择两个或更多的种族。这些信息将使我们了解自然和文化资源领域志愿者队伍的多样性和包容性。

12a. 族裔（单选）： ☐西班牙裔、拉美裔或西班牙裔 ☐非西班牙裔、拉美裔或西班牙裔	12b. 种族（单选或多选，与种族无关）： ☐美国印第安人或阿拉斯加原住民☐亚裔 ☐黑人或非裔美国人☐白人 ☐夏威夷原住民或其他太平洋岛民	12c.您是退伍军人或现役军人吗？ ☐是☐否 12d. 您是否有残疾？ ☐是☐否

紧急联系信息

13.姓名(姓，名)	14.电话	15.电邮地址	
16.街道地址，公寓号码	17.城市	18.州	19.邮政编码

政府官员填写此部分

20.机构/局的名称	21.协议编号
22.机构联系人姓名（姓，名）	23.机构联系人的电子邮件和电话
24.是否批准报销： ☐是 ☐否 报销的类型和比率：	25.志愿者职位/团体项目名称：

26.将要进行的服务的描述。提供志愿者或服务活动的简要摘要和志愿者活动的地点，并附上将要进行的服务描述。服务描述应包括诸如时间和日程承诺、使用政府车辆、使用个人设备和/或车辆、所需技能（如有必要请注明证书）、所需体力活动水平等细节。

志愿者/服务活动摘要

27.请勾选所有适用项：	☐所附的服务描述 ☐需要有效的驾驶执照 ☐需要体检合格证	☐附上 OF-301b 团体志愿者登记表 ☐需要进行背景调查 ☐其他：	☐附有风险评估

Número de control OMB 1093-0006
Fecha de caducidad 31/10/2024

ACUERDO DE SERVICIO VOLUNTARIO - RECURSOS NATURALES Y CULTURALES

1. TIPO DE ACUERDO VOLUNTARIO (Elija 1) ☐ Individual O ☐ Grupo		2.NOMBRE DEL GRUPO (si pertenece)	
3. NOMBRE DEL VOLUNTARIOO DEL LÍDER DEL GRUPO QUE COMPLETA EL FORMULARIO (Apellido, Nombre)		4. CIUDADANO ESTADOUNIDENSE O RESIDENTE PERMANENTE ☐ Sí, soy ciudadano estadounidense o residente permanente ☐ No, no soy ciudadano estadounidense o residente permanente (Si procede, indique el tipo de visa	
5. DIRECCIÓN, CALLE, NÚMERO DE DEPARTAMENTO	6. CIUDAD	7. ESTADO	8. CÓDIGO POSTAL
9. FECHA DE NACIMIENTO	10. TELÉFONO	11. DIRECCIÓN DE CORREO ELECTRÓNICO	

12. INFORMACIÓN DEMOGRÁFICA (Opcional): Por favor, indique tanto la etnia como la raza y díganos si es veterano o tiene alguna discapacidad. Los encuestados multirraciales pueden seleccionar dos o más razas. Esta información nos ayudará a entender la diversidad y la inclusión entre la fuerza de voluntarios en las áreas de recursos naturales y culturales.

12a. Origen étnico (Elija una): ☐ Hispano, latino o de origen español ☐ No hispano, latino o de origen español	12b. Raza (Elija uno o más, independientemente del origen étnico): ☐ Indio americano o nativo de Alaska ☐ Asiático ☐ Negro o afroamericano ☐ Blanco ☐ Nativo de Hawái o de otras islas del Pacífico	12c. ¿Es usted un veterano militar o militar en servicio activo? ☐ Sí ☐ No 12d. ¿Tiene alguna discapacidad? ☐ Sí ☐ No

INFORMACIÓN DE CONTACTO EN CASO DE EMERGENCIA

13. Nombre (Apellido, Nombre)	14. TELÉFONO	15. DIRECCIÓN DE CORREO ELECTRÓNICO	
16. DIRECCIÓN, CALLE, NÚMERO DE DEPARTAMENTO	17. CIUDAD	18. ESTADO	19. CÓDIGO POSTAL

EL FUNCIONARIO DE GOBIERNO COMPLETARÁ ESTA SECCIÓN

20. NOMBRE DE AGENCIA/OFICINA	21. ACUERDO #
22.NOMBRE DE CONTACTO DE LA AGENCIA (Apellido, Nombre)	23. CORREO ELECTRÓNICO Y TELÉFONO DE CONTACTO DE LA AGENCIA
24. REEMBOLSOS APROBADOS: ☐Sí ☐ No Tipo y porcentaje de reembolso:	25. NOMBRE DEL PROYECTO DEL GRUPO/GRUPO DE VOLUNTARIOS

26. Descripción del servicio a realizar. Proporcione un breve resumen de la actividad de voluntariado o servicio y la ubicación de la actividad de voluntariado, y adjunte la descripción del servicio a realizar. La descripción del servicio debe incluir detalles tales como el compromiso de tiempo y horario, el uso de un vehículo del gobierno, el uso de equipo y/o vehículo personal, las habilidades requeridas (anote las certificaciones si son necesarias), el nivel de actividad física requerido, etc.

RESUMEN DE LA ACTIVIDAD DE VOLUNTARIADO/SERVICIO

27. Marque todas las que apliquen:	☐ Descripción del servicio adjunto ☐ Licencia de manejar válida necesaria ☐ Autorización médica requerida	☐ Formulario de Inscripción de Voluntarios OF-301b para grupos adjunto ☐ Se requiere investigación de antecedentes ☐ Otros:	☐ Evaluación de riesgos adjunta

https://corpslakes.erdc.dren.mil/employees/volunteer/forms.cfm

OF 301a

- Official document that legally enrolls an individual in the program and provides federal protection in case of injury or tort claim.
- Must be completed and signed prior to start of work by both the volunteer or organized group representative and the accepting official for all volunteers, even for work projects of only a few hours duration. This can now be done electronically in volunteer.gov if the opportunity is listed there.
- A complete, detailed description of the duties, conditions, and responsibilities and JHA/PHA or AHA must also be attached. This is important in case questions arise on whether the volunteer was acting within the scope of his/her assigned responsibilities. Examples on the Gateway.
- Can be modified at any time by mutual consent, but it must accurately reflect the duties of the volunteers at all times.
- Acceptance/termination line at the bottom of the form provides the accepting official with a means of officially terminating an agreement, if appropriate, and it provides a legal record of when an agreement was terminated in case of a lawsuit or injury claim.

OF 301a

- Remains in effect until terminated but should be reviewed periodically and amended or rewritten for accuracy as projects, requirements, reimbursements, and other elements of a volunteer's service may change.

- A copy of the agreement, along with any revisions or amendments, should be given to the volunteer for their records.

- The original and amendments should be retained by the accepting official for a three-year period following termination in a secured file cabinet or electronically secured folder. These files for inactive volunteers are retained to protect against possible lawsuits or injury claims. After the three-year period, the former volunteer's agreement must be destroyed/shredded.

- Volunteers who are members of a nonprofit organization serving under a Cooperating Association Agreement that requires the association to provide liability coverage for their volunteers do not need to sign an OF 301a.

U.S. ARMY

OF 301 Forms

OF 301b: Volunteer Group Agreement (for adult groups)

If the volunteers are part of a group, the group leader should sign the OF 301a and individual volunteers over the age of 18 should complete the OF 301b.

Individual volunteers under the age of 18 must have their parent or legal guardian complete the OF 301a.

OMB Control Number 1093-0006
Expiration Date 10/31/2024

VOLUNTEER SERVICE AGREEMENT—Natural & Cultural Resources Volunteer Sign-up Form for Groups

All volunteers that participate with an organized group on an episodic volunteer project with a federal land and water management agency must be signed up on this form (unless otherwise signed up under an individual Volunteer Service Agreement, OF-301a). Volunteers under age 18 may not use this form, and must complete an individual Volunteer Service Agreement (OF 301a). This form must accompany a group Volunteer Service Agreement (OF-301a), completed by the group leader. Group leaders are responsible for ensuring every individual signed up on this form understand the duties to be performed and the terms of the project.

PROJECT TITLE:					I understand the health and physical condition requirements for this position, and I know of no medical condition or physical limitation that may adversely affect my ability to provide this service.	I consent to being photographed, and to the release of my photographic image.
GROUP NAME:		AGENCY:				
GROUP LEADER (Last, First):		AGREEMENT # (OF-301A box 21):				
VOLUNTEER NAME (Last, First)	VOLUNTEER E-MAIL ADDRESS	VOLUNTEER TELEPHONE NUMBER	MONTH & YEAR OF BIRTH	VOLUNTEER SIGNATURE		
					Yes ☐ No ☐	Yes ☐ No ☐
					Yes ☐ No ☐	Yes ☐ No ☐
					Yes ☐ No ☐	Yes ☐ No ☐
					Yes ☐ No ☐	Yes ☐ No ☐
					Yes ☐ No ☐	Yes ☐ No ☐
					Yes ☐ No ☐	Yes ☐ No ☐
					Yes ☐ No ☐	Yes ☐ No ☐
					Yes ☐ No ☐	Yes ☐ No ☐
					Yes ☐ No ☐	Yes ☐ No ☐

Número de Control OMB 1093-0006
Fecha de vencimiento 31/10/2024

ACUERDO DE SERVICIO VOLUNTARIO - Formulario de Inscripción de Voluntarios de Recursos Naturales y Culturales para Grupos

Todos los voluntarios que participen en un grupo organizado en un proyecto de voluntariado por episodios con una agencia federal de manejo de tierras y aguas, deben inscribirse en este formulario (a menos que se inscriban en un Acuerdo de Servicio Voluntario Individual, OF-301a). Los voluntarios menores de 18 años no pueden usar este formulario, y deben completar un Acuerdo de Servicio Voluntario Individual (OF-301a). Este formulario debe acompañar a un Acuerdo de Servicio Voluntario de Grupo (OF-301a), completado por el líder del grupo. Los líderes de grupo son responsables de asegurarse que todas las personas inscritas en este formulario comprendan las tareas que deben realizar y las condiciones del proyecto.

NOMBRE DEL PROYECTO:						
NOMBRE DEL GRUPO:		AGENCIA:				
LÍDER DEL GRUPO (Apellido, Nombre):		ACUERDO # (Casilla 21 OF-301A):				
NOMBRE DEL VOLUNTARIO (Apellido, Nombre):	DIRECCIÓN DE CORREO ELECTRÓNICO DEL VOLUNTARIO	TELÉFONO DEL VOLUNTARIO	MES Y AÑO DE NACIMIENTO	FIRMA DEL VOLUNTARIO	Entiendo los requisitos de salud y condición física para este puesto, y no conozco de ninguna condición médica o limitación física que pueda afectar negativamente a mi capacidad para prestar este servicio.	Doy mi consentimiento para ser fotografiado, y para la divulgación de mi imagen fotográfica.
					Si ☐ No ☐	Si ☐ No ☐
					Si ☐ No ☐	
					Si ☐ No ☐	
					Si ☐ No ☐	
					Si ☐ No ☐	
					Si ☐ No ☐	
					Si ☐ No ☐	
					Si ☐ No ☐	
					Si ☐ No ☐	
					Si ☐ No ☐	

NOTE: Mandarin version will not be replaced in the update.

OMB 控制号 1093-0006
终止日期 10/31/2024

志愿者服务协议-自然和文化资源团体志愿者登记表

所有与有组织的团体一起参加联邦土地和水资源管理机构的偶发志愿者项目的志愿者必须在此表格上签名（除非在个人志愿者服务协议（OF-301a）下签名）。18 岁以下的志愿者不能使用此表，必须填写个人志愿者服务协议（OF-301a）。

此表格必须与团体志愿者服务协议（OF-30la）一起，由团体负责人完成。组长负责确保每个在此表上签名的人都了解要履行的职责和项目的条款。

项目名称：					我了解这个职位的健康和身体状况要求，我不知道有任何医疗状况或身体限制可能对我提供这项服务的能力产生负面影响。	我同意被拍照，并同意公布我的照片图像。
团体名称：		机构：				
团体负责人（姓，名）：		协议书编号 (OF-301A box21)：				
志愿者姓名（姓，名）	志愿者电子邮件地址	志愿者电话号码	出生月份和年份	志愿者签名		
					是 ☐ 否 ☐	是 ☐ 否 ☐
					是 ☐ 否 ☐	是 ☐ 否 ☐
					是 ☐ 否 ☐	是 ☐ 否 ☐
					是 ☐ 否 ☐	是 ☐ 否 ☐
					是 ☐ 否 ☐	是 ☐ 否 ☐
					是 ☐ 否 ☐	是 ☐ 否 ☐
					是 ☐ 否 ☐	是 ☐ 否 ☐
					是 ☐ 否 ☐	是 ☐ 否 ☐
					是 ☐ 否 ☐	是 ☐ 否 ☐
					是 ☐ 否 ☐	是 ☐ 否 ☐

Job/Position or Activity Hazard Analysis

- Safety is a top priority in the volunteer program. The same safety training and briefings provided to Corps personnel will also be provided to volunteers. This must include water safety training.
- Job Hazard Analysis (JHA) or Position Hazard Analysis (PHA) must be completed and signed by the Corps volunteer coordinator/supervisor and the volunteer and saved with the OF 301a form.
- Activity Hazard Analysis (AHA) may also be completed for specific one-time tasks/events, or to supplement the JHA
- Examples can be found on the Gateway, but each should be reviewed and revised as necessary to cover what is needed for each specific job, location, and task such as:
  - Backhoe Operation
  - Boat Operation
  - Chainsaw Use / Removing Dangerous Trees
  - Cleaning
  - Electrical Work (General)
  - Ladder Usage
  - Lifting - Tools, Equipment, Materials, Various Objects
  - Loading / Unloading Equipment On/Off Trailer
  - Painting
  - Park Host
  - Riding Mower Operation
  - Shoreline Cleanup
  - Shop Tools / Machinery - Operation
  - Towing a Boat Trailer
  - Trail Work
  - Vehicle Operation

Job Hazard Analyses/Activity Hazard Analyses

U.S. ARMY

Volunteer Park Host - Job Hazard Analysis

Project _____

Volunteer(s) _____

This Job Hazard Analysis will serve as a reminder that **at no time in the performance of your duties should you put yourself at risk of injury.** When a situation arises that could put you in danger, always choose the safe option. If you feel that engaging in an activity could lead to a dangerous situation, get away from the situation and call park ranger staff or 911 for assistance. Your safety is always your top priority.

The following pages describe job hazards that you may encounter during your time on duty. If you become injured while on duty, please note the time, place, and cause of injury and notify a park ranger so that an incident report may be completed. For injuries that require immediate medical attention, please contact a park ranger as soon as possible so that they may meet you at the hospital or doctor's office where you are being treated.

For detailed information on all safety rules and regulations, you should become familiar with the USACE Safety Manual, EM 385-1-1.

I have reviewed the Job Hazard Analysis and accept its terms and conditions.

Volunteer Signature _____

Date _____

Volunteer Signature _____

Date _____

ACTIVITY HAZARDS ANALYSIS

Print Form

Overall Risk Assessment Code (RAC) (Use highest code): M

Date: _____ Project: _____

Activity: Park Host/Recreation Area Volunteers

Activity Location: _____

Prepared By: _____

Risk Assessment Code Matrix

E = Extremely High Risk
H = High Risk
M = Moderate Risk
L = Low Risk

Severity	Probability: Frequent	Likely	Occasional	Seldom	Unlikely
Catastrophic	E	E	H	H	M
Critical	E	H	H	M	L
Marginal	H	M	M	L	L
Negligible	M	L	L	L	L

Add Identified Hazards

	JOB STEPS	HAZARDS	ACTIONS TO ELIMINATE OR MINIMIZE HAZARDS	RAC
X	Walk entire recreation area daily	Snake, insect, tick bites	Be aware of hiding places. Wear appropriate clothing.	L
X		Isolated areas	Be aware of people Walk with someone, if alone let partner know you are going out. Have emergency numbers and carry a phone.	L
X		Fallen branches	Watch where you step Avoid walking during high winds	L
X		Slippery rocks near lake	Wear sturdy shoes Step carefully	L
X		Traffic	Wear reflective clothing, particularly at night Be vigilant near roads	L
X		Broken glass	Watch where you step Pick up very cautiously Carry sturdy bag to collect broken glass	L
X		Weather	Be aware of adverse weather warnings Have a plan in place to go to a safe area	L
X		Ice and Snow	Put ice melt/salt in areas where ice collects Watch your step	L
X		Limited visibility at night disguising tripping hazards	Carry a flashlight	L

SWF Form 385-1 April 2015

Reset Form

https://corpslakes.erdc.dren.mil/employees/volunteer/aha.cfm

DEPARTMENT OF THE ARMY
U.S. ARMY CORPS OF ENGINEERS
441 G STREET, NW
WASHINGTON, DC 20314-1000

CECW-CO 16 January 2026

MEMORANDUM FOR COMMANDERS, MAJOR SUBORDINATE COMMANDS AND DISTRICT COMMANDS, CHIEFS, OPERATIONS DIVISIONS

SUBJECT: Memorandum on Section 1112, Services of Volunteers, and Section 1153, Challenge Cost-Sharing Program for the Management of Recreation Facilities, of the Water Resources Development Act of 2024

1. Purpose. The purpose of this memorandum is to provide guidance for Sections 1112 and 1153 of the Water Resources Development Act of 2024 (WRDA 2024). Section 1112 authorizes the Secretary to recognize volunteers' service through awards. Section 1153 authorizes the Secretary to enter into agreements with private nonprofit entities to collect and retain user fees for the use of developed recreation sites and facilities and reinvest collected fees at the civil works project where collected. A copy of WRDA 2024 Sections 1112 and 1153 are enclosed (Enclosures 1 and 2).

2. Applicability. This memorandum applies to all USACE commands having responsibilities for civil works functions.

3. The contents of this document do not have the force and effect of law and are not meant to bind the public in any way. This document is intended only to provide clarity to the public regarding existing requirements under the law or departmental policies.

4. References.

a. 33 U.S.C. 569c.

b. Water Resources Development Act of 2024, Sections 1112 and 1153, P.L. 118-272.

c. Water Resources and Development Act of 2016, Section 1155, P.L. 114-322.

d. Water Resources Development Act of 1992, Section 225, P.L. 102-580, as amended (33 U.S.C. 2328).

5. Overview. This update to the Partnership and Volunteer Programs is effective immediately and will be incorporated into ER 1130-2-500, "Project Operations – Partners and Support" Chapters 10 -14 when revised.

Volunteer Background Investigation Procedures

Volunteer coordinators will practice due diligence in screening volunteer candidates to assure the safety and security of USACE employees, contractors, and the public.

- ER 1130-2-500, Chapter 10 Volunteers outlines the procedures

https://corpslakes.erdc.dren.mil/employees/volunteer/check.cfm

Volunteer background investigation procedures and requirements decision matrix

Volunteer Type	Level of Background Investigation (BI) Required	Security Office Involvement/ Processes BI	Background Investigation Expiration	Notes
		Level 1		
One-time event.	None required but may choose to use local contractor at project level or District Security Office to run Federal Bureau of Investigation (FBI) fingerprints.	No (unless running an FBI fingerprint check)	N/A	–
Only work under line of sight supervision (LOSS) by USACE personnel with infrequent contact with minors.				
Less than 6 consecutive months and do not meet any of the scenarios below.				
		Level 2		
Work independently of USACE personnel with unescorted access into controlled space/non-public areas.	Special Agreement Check (SAC) FBI fingerprint check.	Yes	SAC valid for lifetime as long as there is not a 2-year break in service.	Fingerprints may be done at military base, District Office, law enforcement office, etc.
Require access to government files/records.				
Collection/handling of fees.				
		Level 3		
Adults volunteering more than 6 consecutive months.	Tier 1: FBI fingerprints, SF 85, and OF-306 using the Personnel Security Investigation Portal (PSIP) and electronic questionnaire for investigation processing.	Yes	BI valid for lifetime as long as there is not a 2-year break in service.	Volunteer may begin their service once their SAC results (FBI fingerprint check), SF85, and OF-306 forms have been favorably reviewed by the District Security Office for no adverse information, and the SF 85 and OF-306 forms have been submitted to OPM through the PSIP to process the full investigation.
Involving regular contact with children under 18 years without a parent or guardian present and without constant LOSS by USACE personnel.			BI valid for 3 years.	
Requiring USACE networked computer access/NIPRnet Enterprise Alternative Token System (NEATS) Token Card.			BI valid for lifetime as long as there is not a 2-year break in service. NEATS Token valid for 5 years.	

Volunteer Background Investigation Procedures and Requirements Decision Matrix

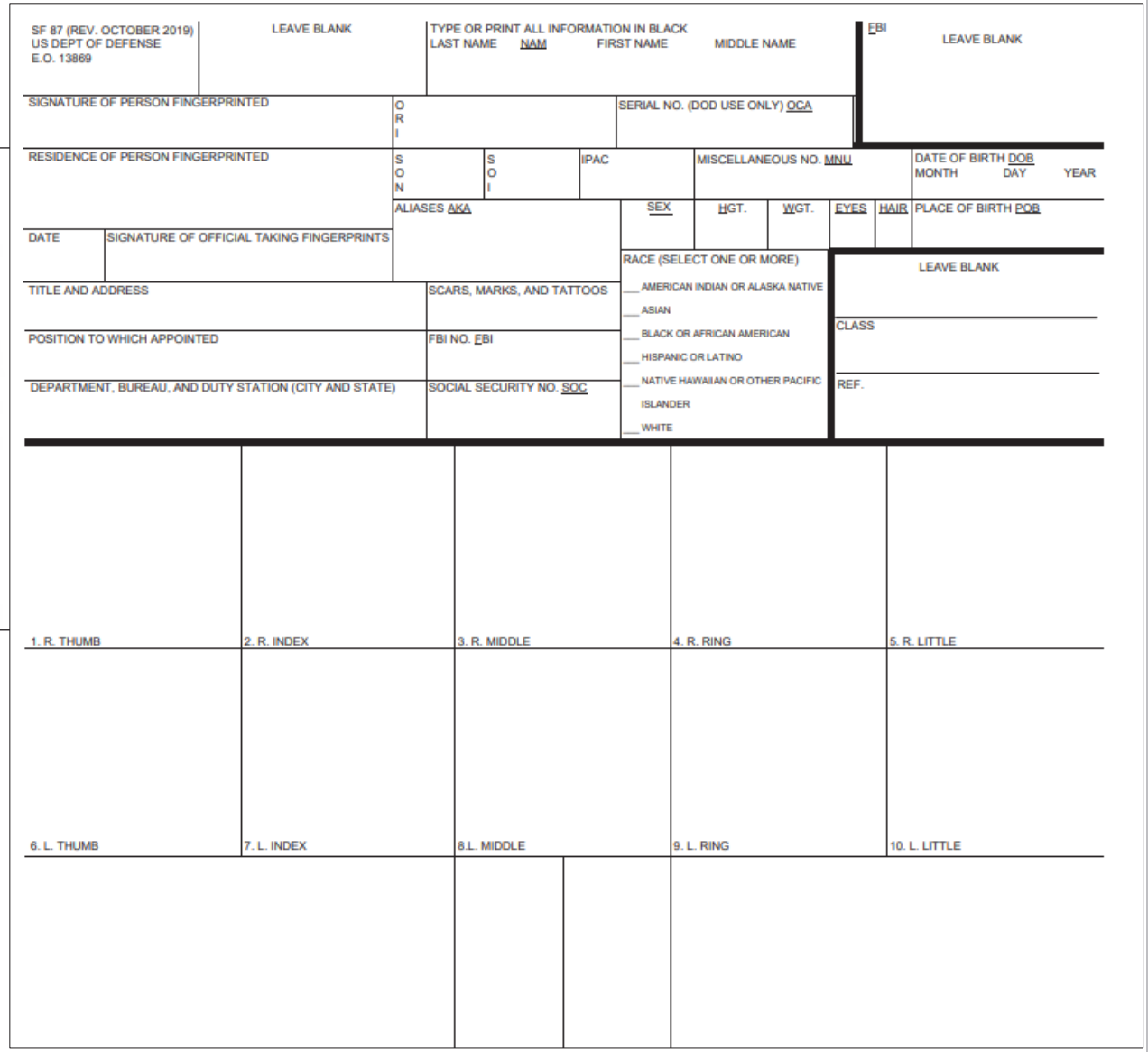
Fingerprinting

- Level 2 and 3 volunteers require background investigation processing through District Security Office. Locations that have previously used outside contractors/vendors to run background investigations will need to coordinate with their Security Office.

- Fingerprinting may be conducted at military bases, District or Division Offices, Project offices, military recruiting centers, universities, other Federal agencies, or law enforcement offices.
  - HQ Security Office may have funding to provide to locations that need to purchase fingerprinting machines (~$3k each) and can provide training. Any USACE employee can take volunteer fingerprints and submit them through the web-based system to their District Security Office.
  - A Special Agreement Check (SAC)/FBI fingerprint check is the terminology used for the standard fingerprinting process.
  - Digital fingerprints are the preferred collection method. In locations where digital collection is not available, fingerprints may be obtained on the SF 87 or FD 285 fingerprint card and submitted to the District Security Office for transmission to the Personal Security Investigation Center of Excellence-(PSI-CoE). All fingerprint cards require a valid Security Officer identifier (SOI), Submitting Office Number (SON), and an Agency Location Code (SLC) to be processed in PSI-CoE.

U.S. ARMY

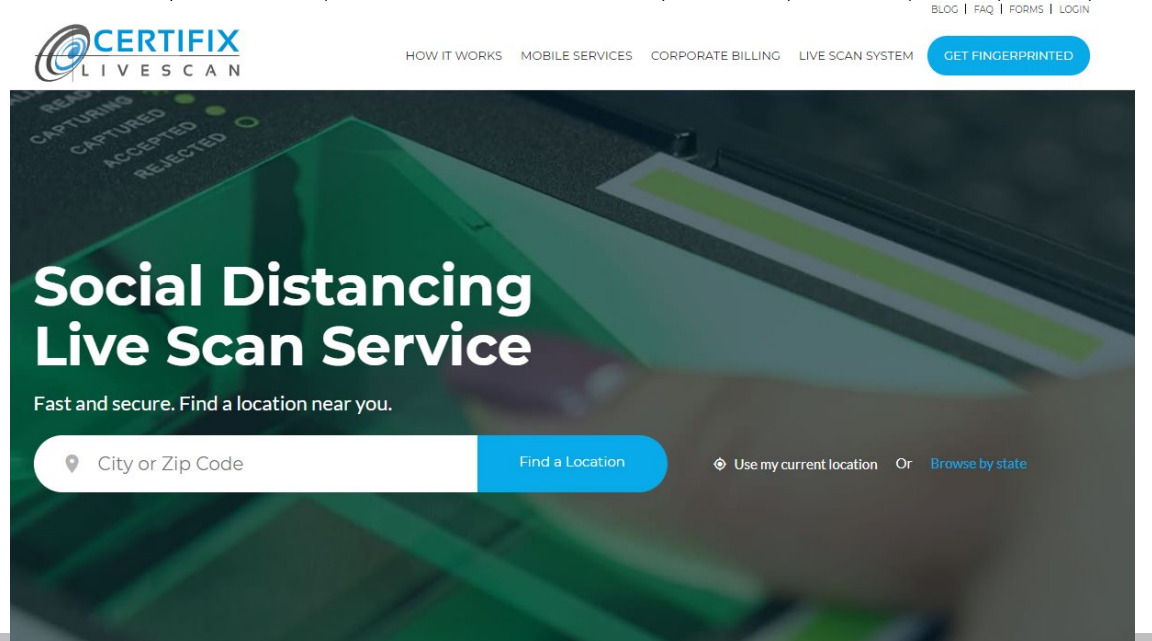
Acceptable Fingerprint Cards



Fingerprinting Locations

MSC	District	Name of Location of Fingerprint Machin	Street Address	City	Stat	Zip	POC name	POC phone	POC email	Appointment Required Y/N	Fee Charged Y/N	Digita	Paper Only	USACE/ Milita
NWD	NWK	Jefferson County Sheriff - Perry Lake	1360 Walnut St.	Oskaloosa	KS	66066		785-863-2351		N	Y	$15	X	
NWD	NWK	Marion County Sheriff - Marion Lake	202 S. 4th St.	Marion	KS	66861		620-382-2144		Y	N	N	X	
NWD	NWK	Miami County Sheriff - Hillsdale Lake	209 S. Pearl St.	Paola	KS	66071		913-294-4444		N	Y	$20	X	
NWD	NWK	Cherryvale Police Department - Big Hill & E	123 W. Main St.	Cherryvale	KS	67335		620-336-2400		Y	Y	N	X	
NWD	NWK	Morris County Sheriff - Council Grove Lake	501 W. Main St.	Council Grove	KS	66846		620-767-6310		Y			X	
NWD	NWK	Osage County Sheriff - Pomona & Melvern	702 Ash	Lyndon	KS	66451		785-828-4991		Y	Y	$10	X	
NWD	NWK	Pottawatomie County Sheriff - Tuttle Creek	108 N. 1st St.	Westmoreland	KS	66426		785-457-3481		N	Y	$10	X	
NWD	NWK	Russell County Sheriff - Wilson Lake	204 E. 4th	Russell	KS	67665		785-483-2151		N	Y	$10	X	
NWD	NWO	NWO District Security Office	1616 Capitol Ave-Room 668	Omaha	NE	68102	Christina Luna	402-995-2828	Christina.Luna@usace.army.mil			X		X
NWD	NWO	Big Bend Project/Lake Sharpe	33573 North Shore RD	Fort Thompson	SD	57339	Delane Albers	605-245-1800	delane.l.albers@usace.army.mil			X		X
NWD	NWO	Gavins Point Project/Lewis & Clark Lake	55245 Hwy 121	Crofton	NE	68730	Brian Ahrnes	402-667-2555	brian.c.ahrens@usace.army.mil			X		X
NWD	NWO	Oahe Project/Lake Oahe	28563 Powerhouse Rd	Pierre	SD	57501	Shannon Lodge	605-945-3402	shannon.m.lodge@usace.army.mil			X		X
NWD	NWO	Bismarck Army Reserve Office	3319 University Dr	Bismarck	ND	58504	Brian Beuten	701-223-5455				X		X
NWD	NWP	NWP District Security Office	333 SW 1st Ave	Portland	OR	97204	Nick Racine Nick Klynne	503-808-4325 503-808-4442	nicholas.m.racine@usace.army.mil Nicholas.M.Klynn@usace.army.mil	Y	N	X		X
NWD	NWP	Lane County Sheriff's Office	125 E 8th Ave	Eugene	OR	97401		541-682-4150		N	$30		X	
NWD	NWW	Clearwater County Sheriff's Office	150 Michigan Ave	Orofino	ID	83544		208-476-4521		Y	$3.00	X		
NWD	NWW	NWW District Office	201 N. 3rd Ave	Walla Walla	WA	99362	James Frank	509-527-7138	james.d.frank@usace.army.mil	Y	N	X		X
NWD	NWW	Idaho State Police	700 S. Stratford Dr	Meridian	ID	83642	Eileen Allen	208-884-7159	eileen.allen@isp.idaho.gov	N	$10.00			

- Consolidated national list on NRM Gateway
- Searchable list of DOJ/FBI-Certified private, state, local providers of electronic fingerprint services: https://www.certifixlivescan.com/



U.S. ARMY

Standard Form 85: Questionnaire for Non-Sensitive Positions (for Tier 1 investigations)

Standard Form 85
Revised December 2013
U.S. Office of Personnel Management
5 CFR Parts 731 and 736

QUESTIONNAIRE FOR NON-SENSITIVE POSITIONS

Form approved:
OMB No. 3206-0261

OPM USE ONLY — Codes | Case Number

Agency Use Only *(Complete items A through K using instructions provided by USOPM)*

A Type of Investigation	B Extra Coverage	C Nature of Action Code	D Date of Action — Month / Day / Year

E Geographic Location	F Position Title	G SON	H SOI

I IPAC	J Accounting Data and/or Agency Case Number

K Requesting Official	Name and Title	Signature	Telephone Number	Date
			( )	

Persons completing this form should begin with the questions below.

1 FULL NAME • If you have only initials in your name, use them and state (IO). • If you have no middle name, enter "NMN". - If you are a "Jr.," "Sr.," "II," etc., enter this in the box after your middle name.

2 DATE OF BIRTH

Last Name	First Name	Middle Name	Jr., II, etc.	Month	Day	Year

3 PLACE OF BIRTH - Use the two letter code for the State.

City	County	State	Country *(if not in the United States)*

4 SOCIAL SECURITY

5 OTHER NAMES USED
Give other names you used and the period of time you used them *(for example: your maiden name, name(s) by a former marriage, former name(s), alias(es), or nickname(s))*. If the other name is your maiden name, put "nee" in front of it.

	Name	Month/Year To Month/Year		Name	Month/Year To Month/Year
#1		To	#3		To
#2		To	#4		To

6 SEX *(Mark one box)* Female ☐ Male ☐

7 CITIZENSHIP

a Mark the box at the right that reflects your current citizenship status, and follow its instructions.

- ☐ I am a U.S. citizen or national by birth in the U.S. or U.S. territory/possession. *(Answer items b and d)*
- ☐ I am a U.S. citizen, but I was NOT born in the U.S. *(Answer items b , c and d)*
- ☐ I am not a U.S. citizen. *(Answer items b and e)*

b Your Mother's Maiden Name

U.S. ARMY

OPM 306: Declaration for Federal Employment (for Tier 1 investigations)

Declaration for Federal Employment*

(*This form may also be used to assess fitness for federal contract employment)

Form Approved:
OMB No. 3206-0182

GENERAL INFORMATION

1. **FULL NAME** (Provide your full name. If you have only initials in your name, provide them and indicate "Initial only". If you do not have a middle name, indicate "No Middle Name". If you are a "Jr.," "Sr.," etc. enter this under Suffix. First, Middle, Last, Suffix)

2. **SOCIAL SECURITY NUMBER**

3a. **PLACE OF BIRTH** (Include city and state or country)

3b. **ARE YOU A U.S. CITIZEN?**

☐ YES ☐ NO (If "NO", provide country of citizenship)

4. **DATE OF BIRTH** (MM / DD / YYYY)

5. **OTHER NAMES EVER USED** (For example, maiden name, nickname, etc)

6. **PHONE NUMBERS** (Include area codes)

Day

Night

Selective Service Registration

If you are a male born after December 31, 1959, and are at least 18 years of age, civil service employment law (5 U.S.C. 3328) requires that you must register with the Selective Service System, unless you meet certain exemptions.

7a. Are you a male born after December 31, 1959? ☐ YES ☐ NO (If "NO", proceed to 8.)

7b. Have you registered with the Selective Service System? ☐ YES (If "YES", proceed to 8.) ☐ NO (If "NO", proceed to 7c.)

7c. If "NO," describe your reason(s) in item 16.

Military Service

8. Have you ever served in the United States military? ☐ YES (If "YES", provide information below) ☐ NO

If you answered "YES," list the branch, dates, and type of discharge for all active duty.
If your only active duty was training in the Reserves or National Guard, answer "NO."

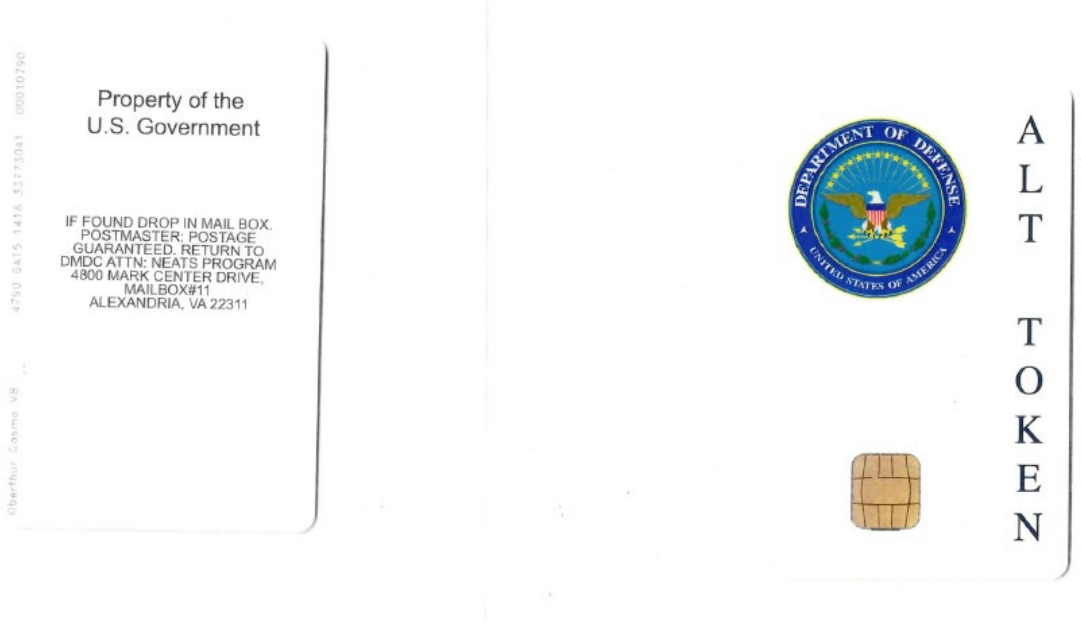
Branch	From (MM/DD/YYYY)	To (MM/DD/YYYY)	Type of Discharge

Background Information

Networked Computer Access for Volunteers

- Volunteers requiring government computer access connected to Department of Defense (DOD) networks must be issued a NEATS token card.

- There is no cost for the NEATS token, but there may be a cost associated with obtaining the required fingerprints during the background check process.



- Volunteers who only use stand alone government computers that are not connected to a DoD network do not require a token

NEATS Token Procedures

1. Volunteer will need to complete OF 306 and SF 87 and send to District VC and Security Office.

2. District volunteer coordinator (sponsor) will submit the Mission Partner Identity, Credentialing and Access Management system (MP ICAM) application and UPASS request.

3. Project VC/Supervisor (VC/S) will approve the application and open a ticket in ACE-IT ServiceNow portal for new user account.

4. Project VC/S or other Admin will call the ISSO Security Branch to see if they have the new application and are ready to issue the NEATS token card. The volunteer will then need an appointment.

5. Project VC/S will get the UPASS User ID & Password emailed to them. The Project VC/S only has 24 hours to access UPASS with the temporary password. *Firefox must be used to do this.*

6. Project VC/S will log the volunteer into UPASS with their username and password. Volunteer will change their password, answer security questions, put in the EDIPI/PIV number (*The Card office will give the volunteer the number, or the Project VC/S can call ACE-IT to get it*)

NEATS Token Procedures

7. Volunteer will need to complete their three trainings.

8. A USACE employee that has a CAC card will need to log on to a computer, plug in an extra card reader into the computer, and insert the volunteer's NEATS token card into the extra card reader.

9. Open up ActivClient. Select Reader List and click on the additional card reader. The volunteer will type the pin they created when they got their card.

10. Click on Tools and publish certificates to Windows.

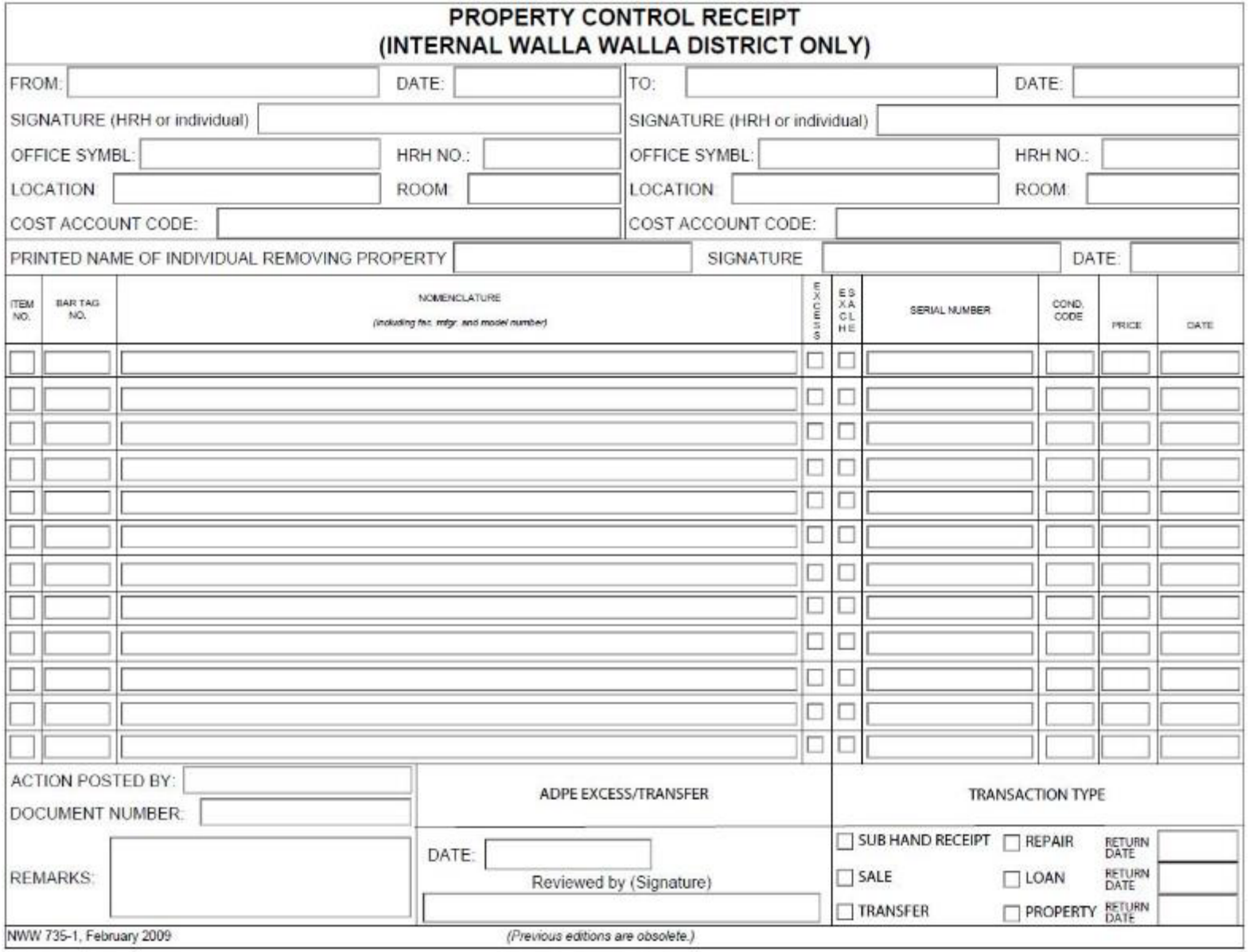
11. Insert the NEATS token card into a computer. The Project VC/S should be able to help the volunteer set up Outlook and Teams. If the Outlook and Teams does not work, you will need to call ACE-IT and get them to give them rights to Outlook and Teams.

Volunteer Use of Government Property

Example from NWW:

- Any Government property loaned to volunteers for use during their assigned work plan must be accounted for by using a Property Control Receipt, form NWW 735-1, signed by the volunteer and the supervisor.

- Upon return of property, note any damage and indicate the date the property was returned on the receipt. Provide a copy of the loan receipt to the volunteer and give the original to the Volunteer Coordinator for the volunteer's personnel file.



PROPERTY CONTROL RECEIPT
(INTERNAL WALLA WALLA DISTRICT ONLY)

FROM:	DATE:	TO:	DATE:
SIGNATURE (HRH or individual)		SIGNATURE (HRH or individual)	
OFFICE SYMBL:	HRH NO.:	OFFICE SYMBL:	HRH NO.:
LOCATION	ROOM	LOCATION	ROOM
COST ACCOUNT CODE:		COST ACCOUNT CODE:	
PRINTED NAME OF INDIVIDUAL REMOVING PROPERTY		SIGNATURE	DATE:

ITEM NO.	BAR TAG NO.	NOMENCLATURE (including fsc, mfgr, and model number)	EXCESS	EXCHANGE	SERIAL NUMBER	COND. CODE	PRICE	DATE

ACTION POSTED BY:
DOCUMENT NUMBER:
REMARKS:

ADPE EXCESS/TRANSFER
DATE:
Reviewed by (Signature)

TRANSACTION TYPE
☐ SUB HAND RECEIPT ☐ REPAIR RETURN DATE
☐ SALE ☐ LOAN RETURN DATE
☐ TRANSFER ☐ PROPERTY RETURN DATE

NWW 735-1, February 2009 (Previous editions are obsolete.)

U.S. ARMY

Volunteer Fee Collection

(Example from NWW)

Handling Government Funds & Collecting Fees from the Public Signature Sheet

In accordance with ER/EP 1130-2-500 Chapter 10, superseded by Implementation Guidance for Section 1047 (d) Services of Volunteers, of the Water Resources and Reform Development Act (WRRDA) of 2014, Public Law 113-121 Paragraph p (1):

"p. Volunteers may be authorized to sell permits and collect fees form the public at campgrounds, day-sue facilities, visitor centers, administration offices and other locations where fee collection is normally performed as a government function. The volunteer coordinator will ensure volunteers sign a statement on the volunteer agreement that states the person accepts the risk and liability of handling government funds. The volunteer coordinator will also ensure that volunteers are properly trained and provided a security awareness briefing prior to assignment of fee collection responsibilities in accordance with ER/EP 1130-2-550 Chapter 9.

(1) Volunteers are agents of the Army and are protected under 31 U.S.C. §3527. This stature states that: "Except in subsection (b), the Comptroller General may relieve a present or former accountable official or agent of the agency responsible for the physical loss or deficiency of public money, vouchers, checks, securities, or records, of may authorize reimbursement from an appropriation or fund available for the activity in which the loss or deficiency occurred for the amount of the loss or deficiency paid by the official or agent as restitution, when –(1) the head of the agency decides that –(A) the official or agent was carrying out official duties when the loss or deficiency occurred, or the loss or deficiency occurred because of an act or failure to act by a subordinate of the official or agent, and (B) the loss or deficiency was not the result of fault or negligence by the official or agent; (2) the loss or deficiency was not the result of an illegal or incorrect payment; and (3) the Comptroller General agrees with the decision of the head of the agency." Volunteers may be required to prove non-negligence for any loss in order to gain relief under the above statute."

This verifies that _____ has been trained for and informed of his or her responsibilities/liabilities in handling Government funds. This volunteer will be performing the following duties as needed and direct by the Operation Project Volunteer Coordinator and Accepting Official.

Operating Project: _____
Volunteer Name: _____
Volunteer Position and Duty Station (explain duties): _____
_____
Volunteer Coordinator Signature: _____ Date: _____
Volunteer Supervisor Signature: _____ Date:_____

Volunteer Safety

- Personal safety equipment will be provided by the government, in accordance with EM 385-1-1, or purchased by the volunteer and considered reimbursable incidental expenses of the volunteer, if authorized in advance by the volunteer coordinator.

- Volunteers performing duties for which federal employees would be provided immunizations, may be provided the same immunizations paid for or reimbursed by the government.

- Volunteers will not be used in work assignments in which USACE personnel would receive hazardous duty pay.

- Volunteers should be encouraged to join staff for the project's monthly safety meetings and be trained in how to properly use water safety rescue equipment and techniques.

Volunteer Safety

- Injuries to volunteers will be reported in the same manner as those involving USACE personnel. Injured volunteer needs to complete online ECOMP claim https://www.ecomp.dol.gov

- Volunteers are entitled to first aid and medical treatment for on-the-job injuries, as well as hospital care when necessary. When travel for receiving medical care is necessary, transportation may be furnished, or the volunteer's travel expenses reimbursed.

- If death results from an on-the-job injury, burial and funeral expenses may be paid. However, burial and funeral payments (to include the amounts of such payments), as well as other possible compensations are regulated by the Office of Worker Compensation Programs.

- Volunteers do not receive compensation for lost wages.

Volunteer Recommended Item Checklist

U.S. ARMY

Volunteer Recommended Item Checklist

Are you planning to volunteer at a USACE location but question what items may be important to have with you? We were hoping to provide you with a basic list of items that may be important to have with you during your time providing volunteer service. Items listed have been organized across multiple different categories to include clothing, paperwork, personal items, RV gear, safety, tools, and miscellaneous.

Clothing

- ☐ Close toed shoes
- ☐ Long pants
- ☐ Long sleeved shirt
- ☐ Rain gear
- ☐ Specific gear/clothing needed for region's climate
- ☐ Sunglasses

Paperwork

- ☐ Completed volunteer forms if provided to you prior to the start of your volunteer service
- ☐ Birth Certificate
- ☐ Driver's License
- ☐ Passport
- ☐ Notepad

Personal Items

- ☐ Bug Spray
- ☐ Toiletry items. Prepare to use onsite community bathroom if no shower in RV or camper
- ☐ Binoculars
- ☐ Camping chairs

RV/Camper Gear

- ☐ Backup generator in case of power outage in campground
- ☐ Camper or RV
- ☐ Drinking water hose
- ☐ Electrical Cord the fits RV AND fits provided electric at site (30 amp vs 50 amp)

NOTE: These lists are not all-inclusive and will vary depending on where the volunteer service is performed. Please contact your volunteer coordinator point of contact at the project you will be working to get specifics for your volunteer position and location.

- List of common items volunteers might want to bring, and items provided by USACE.
- Available on the Gateway.

RV/Camper Gear Continued

- ☐ Extra Fuses for camper and know where the breakers are
- ☐ Internet provider (USACE does not typically provide internet)
- ☐ Jumper cables
- ☐ Portable waste tank if there Is no sewage on site
- ☐ Power cords
- ☐ RV surge protector
- ☐ Sewer hose support
- ☐ Surge Protector for RV
- ☐ Tarps
- ☐ Tire pressure gauge
- ☐ Spare Tires
- ☐ Water filtration system
- ☐ Water hose for camper
- ☐ Water pressure regulator
- ☐ Wheel chalks/stops
- ☐ Winterization equipment to make sure water tanks or lines doesn't freeze in camper

Safety

- ☐ Work Gloves (often provided by USACE, however, if you have preferred work gloves bring them along)
- ☐ Flashlight
- ☐ Fire extinguisher
- ☐ Lantern for camp
- ☐ Special eye protection (if need prescription lenses)
- ☐ Steel toed shoes (if maintenance worker)
- ☐ Additional safety items may be provided by USACE

Tools

- ☐ Hand tools for personal use
- ☐ Tools needed to complete volunteer work will be provided by USACE

Items Often Provided by USACE

Clothing

- Volunteer Uniform
  - Vests
  - Sweatshirts
  - Polos
  - T-shirts
  - Ball caps
  - Nametag

Paperwork

- Volunteer Forms

RV

- RV site with fire pit, picnic table, water, electric (and often sewer)

Safety

- First aid kit with basic supplies
- Flashlights
- Handheld radio with USACE and law enforcement channels
- High visibility vest
- Personal protective equipment
- Safety glasses
- Steel toe boots
- Training (First aid/CPR) – Depending on the location

Tools

- Binoculars
- Hand tools (hammers, screwdrivers, shovels, drills, etc.)
- Multi tool
- Pocket knife
- Power tools and fuel for tools
- Supplies for special projects
- Work gloves

https://corpslakes.erdc.dren.mil/employees/volunteer/plans.cfm

Resources: NRM Gateway Volunteer Page

https://corpslakes.erdc.dren.mil/employees/volunteer/volunteer.cfm

US Army Corps of Engineers

Natural Resources Management Gateway
to the future . . .

Home | Visitors | Lake Discovery | Recreation | Env Compliance | Env Stewardship | Partners
News/Events | People | Forums | Learning | GETS | Tools | New Postings | Submit | Index/Search

Volunteer

Volunteer Program

Headquarters POC

Corps projects offer many volunteer opportunities in recreation and natural resources management. Volunteers can serve as park and campground hosts, staff visitor centers, conduct programs, clean shorelines, restore fish and wildlife habitat, maintain park trails and facilities, and more. Corps personnel can recruit their own volunteers or get help from the Volunteer Clearinghouse, (1-800-VOL-TEER or 1-800-865-8337), a national information center for people interested in volunteering at Corps projects across the country. Corps offices that have upcoming projects or events that volunteers can assist with may use the Volunteer Clearinghouse to submit their volunteer projects on-line.

- Policy & Procedures
- Volunteer Forms
- Program History
- Training
- Volunteer Clearinghouse
- Related Sites
- National Public Lands Day
- Division & District POCs
- Volunteer Awards
- Volunteer Program Annual Reports
- News / Current Issues
- FAQs
- Good Enough to Share
- Volunteer Clothing, Posters, and Brochures
- Volunteer Plans and Handbooks
- Job/Activity Hazard Analyses
- Background Checks/Volunteer Computer Access
- Corps Photo Album for Volunteers
- Volunteer Pass Program

Upcoming Volunteer Webinars / Important Dates

- Mar 3, 11:00 – 12:00 Pacific/ 2:00 – 3:00 Eastern: Volunteer orientation, training, supervision. Incidental expenses and reimbursements

- Mar 5, 8:30 – 9:30 Pacific/ 11:30 – 12:30 Eastern: Volunteer evaluations and awards. Entering volunteer data in CWBI

- Apr 19 – 25: National Volunteer Week

**This webinar has been recorded and will be posted along with the slides on the NRM Gateway Partnerships and Volunteer training pages:
https://corpslakes.erdc.dren.mil/employees/training.cfm?Id=partner&View=yes
https://corpslakes.erdc.dren.mil/employees/training.cfm?Id=volunteer&View=Yes