



Volunteer Request Form

Thank you for volunteer request! Please fill out the top section of this form and send it via email to ahurt@cityofmitchell.org. We will try our best to fill your request from our volunteer database. **Any changes to your volunteer request will require the agency to fill out an updated form.**

Agency: _____ Date: _____
 Contact Name: _____
 Email: _____ Phone: _____

Name/Type of Event: _____
 Event Date: _____ Event Time: _____
 Event Location: _____
 # of Volunteers Needed: _____
 Description of Volunteer Duties: _____

Office Use Only

Agency MOU Complete: Yes No
 Volunteers Contacted Via: Phone Email
 Date Volunteers Contacted: _____
 # of Volunteers Secured: _____

Volunteer Names (use back of form if needed):

1		8	
2		9	
3		10	
4		11	
5		12	
6		13	
7		14	

Date Confirmation Sent to Agency Contact: _____ Email Phone

Reminder Call to Volunteers Needed: Yes No Date of Call: _____