FOR OFFICIAL USE ONLY								
		VOLU	NTEER AG	GREEMEN	IT FOR			
		NONAPPROPRIATED FUND INSTRUMENTALITIES						
		PRI		T STATEM	IENT			
AUTHORITY: 10 U.S.C. 1588, Auth Services in the Department of Defen PRINCIPAL PURPOSES(S) : To acl before a statutory individual is allowe ROUTINE USES : There are no spee uses that are identified in each of the http://dpcld.defense.gov/Privacy/SOI Volunteers (at http://dpcld.defense.g Volunteer and Request Record (at h DISCLOSURE : Voluntary; however, voluntary services to Appropriated F	se. knowledge and do ed to provide volu cific routine uses e following system RNsIndex/DoD-wi ov/Privacy/SORN ttp://dpcld.defense , lack of a signed	bocument Volunte nteer services. anticipated for th s of records noti ide-SORN-Article IsIndex/DoD-wide e.gov/Privacy/SO Volunteer Agree	er Agreem nis informat ices: (1) A e-View/Arti e-SORN-A DRNsIndex ment will li	ent for App ion; howev 0608b DF cle/570084 rticle-View /DOD-wido mit Goverr	oropriated F /er, it may I SC, Person I/a0608b-cl //Article/570 e-SORN-Ar ment supp	Fund Activiti be subject to nal Affairs: A fsc/); (2) NM 0427/nm017 rticle-View/A	es or Nonapprop o a number of pro Army Community 101754-2, DON F 54-2/); and (3) F(Article/569815/f03	riated Fund Instrumentalities per and necessary routine Service Assistance Files (at amily Support Program 036 AFDPC, Family Services 6-af-dp-c/).
		PART 1	- GENER	AL INFOR	MATION			
1. NAME OF VOLUNTEER (Last, First, Middle Initial) 2. NAME OF PARENT/GUARDIAN (If volu under age 18) (Last, First Middle Initial)				Inteer is 3. VOLUNTEER IS (Select one) AGE 18 OR OVER UNDER AGE 18				
4. TELEPHONE NUMBER (Include Area Code)				5. E-MAIL ADDRESS				
	PART II - VO	DLUNTEER ASS	BIGNMENT	(to be cor	mpleted by	Accepting (Official)	
6. INSTALLATION/COMPONENT ACTIVITY						9. ANTICIPA WEEK	ATED DAYS OF	10. ANTICIPATED HOURS
11. DESCRIPTION OF VOLUNTEE	R SERVICES		1					
		PART III -	VOLUNTE	ER CERT	IFICATION	ı		
12. CERTIFICATION I expressly agree that my service Government or any instrumentality the volunteer services, tort claims, the P am neither entitled to nor expect any regulations applicable to voluntary set and organization rules and procedure	nereof, except for rivacy Act, crimina present or future ervice providers, t	certain purposes al conflicts of inte salary, wages, c o participate in a	s relating to erest, and o or other be any training	o compens defense of nefits for th required t	ation for inj certain suit nese volunt o perform a	juries occuri ts arising ou ary services assigned vol	ing during the pe t of legal malprace . I agree to be bo	rformance of approved tice. I expressly agree that I ound by the laws and
a. SIGNATURE OF VOLUNTEER	b. SIGNATURE OF PARENT/GUARDIAN (if volunteer is under age 18)			c. D	c. DATE SIGNED (YYYYMMDD)			
13.a. NAME OF ACCEPTING OFFI (Last, First, Middle Initial)	b. SIGNATURE				c. D.	c. DATE SIGNED (YYYYMMDD)		
PART IV - TO BE COMP	LETED AT END		R'S SERVI	CE BY VO	LUNTEER	SUPERVIS	OR AND SIGNE	D BY VOLUNTEER
a. YEARS. (2,087 hours = 1 year) b. WEEKS					c. DAYS		d. HOURS	15. SERVICE END

FOR OFFICIAL USE ONLY

VOLUNTEER AGREEMENT FOR APPROPRIATED FUND ACTIVITIES or NONAPPROPRIATED INSTRUMENTALITIES INSTRUCTIONS FOR COMPLETING DD FORM 2793

DD Form 2793, Volunteer Agreement for Appropriated Fund Activities and Nonappropriated Fund Instrumentalities, is available online at, http://www.esd.whs.mil/ Portals/54/Documents/DD/forms/dd/dd2793.pdf. A Volunteer Agreement must be completed and signed by both Volunteer (or Parent/Guardian of volunteer under the legal age of majority) and Government Accepting Official (Installation Volunteer Coordinator or similar) before volunteer begins voluntary service. The accepting official will furnish the volunteer a copy of DD Form 2793, and retain the original in accordance with *DoD Instruction (DODI) 1100.21, Voluntary Services in the DoD* and the Military Departments' Records Disposition Issuances.

VOLUNTEER AGREEMENT FOR APPROPRIATED FUND ACTIVITIES or NONAPPROPRIATED INSTRUMENTALITIES. To be completed by Government official applicable to the volunteer's assignment.

PART I - GENERAL INFORMATION (to be completed by Volunteer or Parent/Guardian as specified)

1. NAME OF VOLUNTEER. (Last, First, Middle Initial)

- 2. NAME OF PARENT/GUARDIAN. (if volunteer is under legal age of majority) (Last, First, Middle Initial) Parent/guardian signature is required only if volunteer is under the legal age of majority.
- 3. VOLUNTEER IS: AGE 18 OR OVER OR UNDER AGE 18. Check applicable box to indicate whether volunteer is an adult or minor child (under the legal age of majority).
- 4. TELEPHONE NUMBER. (Include Area Code) List number where volunteer prefers to be contacted.
- 5. E-MAIL ADDRESS. List address where volunteer prefers to be contacted.

PART II - VOLUNTEER ASSIGNMENT (to be completed by Accepting Official)

- 6. INSTALLATION/COMPONENT ACTIVITY. List the installation/component activity where voluntary service will be performed or that assumes primary responsibility for the volunteer program.
- 7. ORGANIZATION or UNIT WHERE SERVICE OCCURS.
- 8. PROGRAM WHERE SERVICE OCCURS. List organization or unit program or location where voluntary services will be performed.
- 9. ANTICIPATED DAYS OF WEEK. List anticipated day(s) volunteer will be donating services.

10. ANTICIPATED HOURS. List anticipated times or number of volunteer hours to be provided per specified time period.

11. DESCRIPTION OF VOLUNTEER SERVICES. Briefly describe assigned voluntary service duties.

PART III - VOLUNTEER CERTIFICATION

12. CERTIFICATION. Certification must be signed and dated by both Volunteer and Government Official accepting volunteers providing voluntary services. Accepting Official must check either Appropriated Fund Activity or **Non-appropriated** Fund Instrumentality at the top of DD Form 2793.

a. SIGNATURE OF VOLUNTEER.

- b. SIGNATURE OF PARENT/GUARDIAN. (if Volunteer is under legal age of majority).
- c. DATE SIGNED (YYYYMMDD). List date signed by Volunteer.

13. NAME OF ACCEPTING OFFICIAL.

- a. (Last, First, Middle Initial).
- b. SIGNATURE. Signature of Accepting Official.
- c. DATE SIGNED (YYYYMMDD). List date signed by Accepting Official.

PART IV - COMPLETED AT END OF VOLUNTEER'S SERVICE BY VOLUNTEER SUPERVISOR AND SIGNED BY VOLUNTEER

14. AMOUNT OF VOLUNTEER TIME DONATED.

- a. YEARS. (2,087 hours = 1 year)
 - b. WEEKS.

c. DAYS. This may apply to volunteers designated as Special Government Employees. Consult Ethics Counselor for details.

d. HOURS. Total number of voluntary service hours donated.

15. SERVICE END DATE (YYYYMMDD). Volunteer Supervisor lists final day of voluntary service.

16. VOLUNTEER SIGNATURE.

a. Volunteer's signature verifies voluntary service time donated.

b. PARENT/GUARDIAN SIGNATURE. (if Volunteer is under legal age of majority).

- 17. NAME OF SUPERVISOR.
 - a. (Last, First, Middle Initial) of Volunteer Supervisor.
 - b. SUPERVISOR SIGNATURE. Signature of Volunteer Supervisor or Accepting Official verifies total amount of voluntary service time donated.
 - c. DATE SIGNED (YYYYMMDD). Date signed by Volunteer Supervisor or Accepting Official.