

Volunteer Hiring Checklist

Name _____ Phone _____

E-mail _____ Reporting Dept/Area _____

In case of an emergency, please notify the following person:

Name _____ Phone _____

Relationship _____

	Item	Completed
Forms	Volunteer Application	
	Job Description	
Training	Auto Coverage and Safety Training <i>If driving a state vehicle Training will be needed.</i>	
	Drug Free Workplace Statement	
	Right to Know Chemical Training <i>If working with chemicals, Training will be needed.</i>	
	Non-Harassment Training	
For HR Use	Background/MVR Completed	