

**U.S. DEPARTMENT OF AGRICULTURE  
STUDENT VOLUNTEER AGREEMENT**

This agreement covers the acceptance of volunteer service under 5 USC 3111, 7 USC 2272, and 5 CFR 308. It also serves as a record of student volunteer service.

**Student Volunteer Name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

I understand that:

- My services are on a volunteer basis without compensation or reimbursement for any incidental expenses.
- I am not considered a Federal employee except for the purposes of the Federal Employees Compensation Act and the Federal Tort Claims Act and will not be eligible for health insurance, life insurance, retirement or any other benefits.
- My service may not be credited for civil service retirement purposes if I am later employed by the government, though the work may count as experience for qualifications purposes.
- I am permitted access to the work site only during my approved duty hours.
- I am to conduct myself with honesty and integrity and observe all rules of safety in the performance of my duties.
- Permission must be given by my supervisor before I operate any government equipment or motor vehicle or handle any property, that it may be used for approved, official purposes only, and that I may be held responsible for any unreasonable damage.
- I am not authorized to represent the agency in any matter or proceeding nor expend government funds.
- Any inventions made during the assignment must be submitted to the Agency/Staff Office for a determination of rights. Prior approval must be obtained prior to publishing the results of any work, study or research.
- I serve under the supervision of a Federal official. A record of my attendance and evaluation of my performance will be provided to my educational institution and to me when the work assignment is completed.
- This agreement may be terminated at any time by my educational institution, the Agency/Staff Office, or me.

\_\_\_\_\_  
(Student Volunteer Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(If under 18 years of age, Parent/Guardian Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Responsible Educational Institution Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Supervisor/ Signature)

\_\_\_\_\_  
(Date)

**U.S. DEPARTMENT OF AGRICULTURE  
STUDENT VOLUNTEER SERVICE TIME AND ATTENDANCE RECORD**

**Student Volunteer Name:** \_\_\_\_\_

**Educational Institution Name and Address:** \_\_\_\_\_  
\_\_\_\_\_

**USDA Agency/Staff Office Name and Location:** \_\_\_\_\_  
\_\_\_\_\_

	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		TOTAL
	IN	OUT	IN	OUT	IN	OUT	IN	OUT	IN	OUT	
1st Week											
2nd Week											
1st Week											
2nd Week											
1st Week											
2nd Week											
1st Week											
2nd Week											
1st Week											
2nd Week											
1st Week											
2nd Week											
1st Week											

**Beginning Date of Service Period:** \_\_\_\_\_

**Ending Date of Service Period:** \_\_\_\_\_

**U.S. DEPARTMENT OF AGRICULTURE  
STUDENT VOLUNTEER SERVICE EVALUATION**

**TO:**

\_\_\_\_\_  
**Agency/Staff Office Student Employment Program Manager  
or Other Responsible Official and Educational Institution**

**FROM:**

\_\_\_\_\_  
**Supervisor Name and Organization**

**Student Volunteer Name:** \_\_\_\_\_

**Service Period Covered: From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**USDA Agency/Staff Office Name and Location:** \_\_\_\_\_

**1. Brief description of work assignments:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. Skills and knowledge gained:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. Comments:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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(Supervisor Signature)

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(Date)