**Voluntary Work Agreement**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **DYCD Contractor:** | |  | | | |
| **Registration**  **ID #:** |  | | | **Participant Name:** |  |
| **Worksite Name:** | |  | | | |
| **Worksite Address:** | | |  | | |

This agreement is hereby entered into between \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name of Worksite) and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name of participant), as follows:

The Work Site hereby accepts the Participant as a **volunteer** for the period of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_from the hours of \_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_ for a total of \_\_\_\_\_\_\_\_\_ hours per day, and \_\_\_\_\_\_\_\_\_hours per week, as these days and hours to be worked are in excess of the participant's paid employment with the **Department of Youth and Community Development (DYCD) Learn & Earn Summer Internship Program.**

**My signature below indicates that I have read and understood this Agreement, and that I am in full agreement.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Participant Name:** |  | **Signature:** |  | **Date:** |  |
| **Parent/Guardian Name:** |  | **Signature:** |  | **Date:** |  |
| **Worksite Representative Name:** |  | **Signature:** |  | **Date:** |  |
| **DYCD Contractor Representative Name:** |  | **Signature:** |  | **Date:** |  |