



## Group Volunteer Application

*If your group would like to volunteer its services or time with the Connecticut Department of Energy and Environmental Protection, you must complete and submit this entire application to the address indicated at the end of this form.*

*Individuals need to complete and submit the Individual Volunteer Application Form.*

*Please refer to "Volunteer Opportunities" on the DEEP website at [www.ct.gov/dep/volunteer](http://www.ct.gov/dep/volunteer)*

### Part I: Group Volunteer Information

1. Group Name:

Address:

City/Town:

State:

Zip Code:

2. Group Coordinator:

Home Phone:

Business Phone:

E-mail:

3. Provide the information below for each member of the group who will be volunteering:

Name:

Address:

City/Town:

State:

Zip Code:

Phone:

Name:

Address:

City/Town:

State:

Zip Code:

Phone:

Name:

Address:

City/Town:

State:

Zip Code:

Phone:

Check here if additional sheets are necessary. Please label and attach them to this sheet.

**Part I: Group Volunteer Information (continued)**

4. How did the group learn of the volunteer opportunity at DEEP?:

5. Has the group volunteered at the DEEP before?  Yes  No

If Yes, when:

Where:

Describe Tasks Performed:

6. Please indicate the type of activity in which your group is interested (indoor or outdoor, clerical, artistic, research, forestry, environmental health, writing, highway/river cleanup, recycling, interpretive/educational, etc.):

7. How much time can your group devote to this activity?

Hours/week:

Hours/month:

8. Availability: Please specify days and/or times when available:

Weekdays:

Evenings:

Weekends:

9. Locations Preferred (in order of preference):

10. Is the group willing to travel to various locations?  Yes  No

**Part I: Group Volunteer Information (continued)**

11. Is there liability insurance in place under the organization's name?  Yes  No

If yes, does this include:  Officer's Only  All Members

If yes, provide the renewal date of the policy:

If yes, explain the nature of the coverage (i.e., Does it cover injuries sustained by members of your group?, Does it cover personal injury to non-members? Does it cover property damage?)

**Part II Release of Liability**

We, \_\_\_\_\_, intend to  
*(Print Name of Organization)*

work as volunteers with the Department of Energy and Environmental Protection.

We will abide by all rules, policies, directives and laws of the Department of Energy and Environmental Protection. We hereby release the Department of Energy and Environmental Protection and its employees and agents from any liability for any accident or injury we might suffer during the course of our volunteer work including accidents or injuries that occur as the result of negligence, but not intentional acts or omissions, by employees or agents of the Department of Energy and Environmental Protection.

***Please print name and sign next to name (minors need to have parents/guardians sign this part)***

Print Name of Each Volunteer	Check Box if a Minor	Signature
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	

Check here if additional sheets are necessary. Please label and attach them to this sheet.

**Part III: Certification**

On behalf of , \_\_\_\_\_  
*(Group name)*

I certify that: (1) the information on this application is correct; (2) we understand that the first month of volunteer work for the DEEP will be considered a trial period for \_\_\_\_\_  
*(Group name)*

as well as the DEEP; and (3) the members of \_\_\_\_\_  
*(Group name)*

that act as volunteers for DEEP will review and abide by those policies, directives and laws that are provided to them either orally or in writing.

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*Signature of Group Coordinator* \_\_\_\_\_ *Date* \_\_\_\_\_

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*Name (print or type)* \_\_\_\_\_

To volunteer for a State Park program, please submit this completed form to:

STATE PARKS AND PUBLIC OUTREACH DIVISION  
BUREAU OF OUTDOOR RECREATION  
DEPARTMENT OF ENERGY AND ENVIRONMENTAL PROTECTION  
79 ELM STREET  
HARTFORD, CT 06106-5127

To volunteer for **other than a State Park program**, please submit this completed form to:

OFFICE OF AFFIRMATIVE ACTION  
DEPARTMENT OF ENERGY AND ENVIRONMENTAL PROTECTION  
79 ELM STREET  
HARTFORD, CT 06106-5127

The Department of Energy and Environmental Protection is an affirmative action/equal opportunity employer and service provider. In conformance with the Americans with Disabilities Act, DEEP makes every effort to provide equally effective services for persons with disabilities. Individuals with disabilities who need this information in an alternative format, to allow them to benefit and/or participate in the agency's programs and services, should call 860-424-3035 or e-mail the ADA Coordinator at [DEEP.aoffice@ct.gov](mailto:DEEP.aoffice@ct.gov). Persons who are hearing impaired should call the State of Connecticut relay number 711.