



Department of Homeland Security

REQUEST TO PARTICIPATE IN VOLUNTEER OPPORTUNITY

EMPLOYEE NAME:	DATE OF ACTIVITY:
AGENCY, DIVISION, BRANCH:	
EMAIL ADDRESS:	PHONE NUMBER:
TYPE OF VOLUNTEER OPPORTUNITY:	
DESCRIPTION OF ACTIVITY:	
ESTIMATED TIME SPENT AT VOLUNTEER ACTIVITY:	
I hereby certify that to the best of my knowledge the above provided information is true. I also certify that, to the best of my knowledge, there are no other issues involved with holding this event that would create the appearance of impropriety.	
EMPLOYEE'S SIGNATURE:	DATE:
SUPERVISOR'S SIGNATURE:	DATE: