



DEPARTMENT OF EMPLOYEE RELATIONS

Issuance Date: January 1, 2022

Volunteer Time Off Request and Verification Form

Employee must submit the completed form in advance of the volunteer time off to the supervisor and may not take the time off unless approved by the supervisor in advance of the volunteer time off. Department Personnel Officers place completed forms in employee personnel file and email a copy to derpersonnelforms@milwaukee.gov
Pay code for volunteer time is: VOL; account code 9900.

Employee: _____ Employee ID or PeopleSoft ID: _____
(First Name, Last Name)

Name of Organization/Agency/Event: _____

Date of Volunteer Event: _____ Number of hours: _____

Time Volunteered ____:____ am/pm to ____:____ am/pm

Organization Address: _____

Volunteer Event Address (must be in City of Milwaukee): _____

Type of Opportunity:

- Education and Youth Services Environment Health Community development
 Animal Care Food Collection, Preparation, Distribute, and/or Service General Labor
 Other: _____

Supervisor Approval: _____

Approval Date: _____

To Be Completed by Agency Representative at time of volunteer event

Representative Signature: _____

Representative Name & Title (Please Print): _____

Representative Phone and Email for Verification: _____
