

United Way's Celebration of Caring Company Work Day Wednesday, September 16 Project Application Form



**Complete one form for each project and return by
Monday, July, 20, 2009**

Organization: _____

Address: _____

Project Contact: _____ Phone: _____

Fax: _____ E-mail Address _____

CELEBRATION OF CARING PROJECT DESCRIPTION

Please give us a description of your project below. Depending on the number of volunteers available, it **may** be possible to complete more than one project at your agency. If you have multiple work requests, please complete a separate application form per project, and prioritize them. *(We will make our best efforts to fill the project needs, but United Way of North Rock County reserves the right to decline a requested project.)*

Skills or Supplies Needed _____

Work Site Address _____ **City** _____

Site Coordinator (If different from above) _____ **Phone** _____

Site Coordinator's e-mail _____

The Site Coordinator assumes responsibility for 1) inspecting the worksite prior to the event 2) ensuring that all work materials are available at the work site and 3) providing water and beverages to the volunteers 4) coordinating details with the Team Leader (employee assigned to the project by the company working on the project) 5) supervising the volunteers on the work day.

Project will be: _____ Indoors _____ Outdoors

Number of volunteers needed: _____ Minimum _____ Maximum

Estimated hours needed to complete the project: _____

Select One:

Morning 9 a.m.- 12:30 p.m. _____

All Day Project 9 a.m. – 3:30 p.m. _____

Afternoon 12 p.m. – 3:30 p.m. _____

Other _____

Please return Project Applications to:

United Way's Volunteer Network
205 N. Main St. Suite 101
Janesville, WI 53545

jcunningham@uwnrc.org

FAX: 608-757-3055

Questions?.....Call Julie @ 608-757-3058