



ABRAHAM BALDWIN AGRICULTURAL COLLEGE

Office of Human Resources

Volunteer Check List

Name

Phone

E-mail

Reporting Dept/Area

In case of an emergency, please notify the following person:

Name

Relationship

Phone Number

	Item	Completed
Forms	Volunteer Application (2 pages)	
	Job Description	
	Driver's License or Picture ID <i>If driving state van or bus, CDL will be needed</i>	
	Background Request Form, <i>if needed</i>	
Training	Drug Free Workplace Statement	
	Non-Harassment Training	
	Auto Coverage and Safety Training, <i>If driving a state vehicle, training will be needed</i>	
	Right to Know Chemical Training, <i>If working with chemicals, training will be needed</i>	