

Volunteer Time Off (VTO) Request Form

Employee Name:

Community Organization Name:	
Nature of Organization:	
Date/Hours Requested:	
Specific Service You Will Be Providing:	
This is to acknowledge that I desire to volunteer that these services rendered by me will be solely I represent that I will not receive any monetary of time, although I may accept meals provided duri	at the direction of the organization listed above or other compensation by the organization for my
I understand that I am not acting in the course an VTO; therefore, I agree to hold Royal American or other loss occurring while engaged in any actiunderstand that Royal American Companies retarequest for VTO.	Companies harmless in the event of any injury vity for which I am receiving VTO. I further
Employee/Volunteer Signature	Date
Supervisor Signature	Date

** Submit Form to Human Resources when approved **