



Community Service Volunteer Requirements

Second Harvest Northern Lakes Food Bank

Community Service Volunteer Requirements

Second Harvest Northern Lakes Food Bank offers volunteer opportunities for court ordered individuals on a case-by-case, limited basis.

We may be able to fulfill volunteer requirements for:

- Misdemeanor drug (marijuana only), alcohol, traffic, theft or other non-violent crimes

We are unable to fulfill volunteer requirements for:

- Felony offenses or violent misdemeanors
- Convictions for violent crimes, crimes of sexual nature, or convictions that conflict with the volunteer opportunity

Community Service Volunteer Requirements

- All community service volunteers are required to complete a Volunteer Application/Agreement and Community Service Volunteer Agreement
- Show for scheduled shift only when notified and scheduled to do so
- Listen, follow instructions, behave appropriately
- Remain in designated areas and under the direct supervision of those assigned to you
- Abide by any other assigned requirements or procedures related to the volunteer opportunity

Second Harvest Northern Lakes Food Bank reserves the right to excuse community service volunteers whose conduct disrupts or poses a safety threat to our operation, themselves or others.





Community Service Volunteer Agreement

Full Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Offense Information

ID #: _____ Case #: _____

Offense: _____

Required Hours: _____ Required Completion Date: _____

How many hours are you requesting to complete at Second Harvest: _____

Referring County: _____ Referring Contact: _____

Contact Phone: _____ Contact Email: _____

Verification required upon completion of hours (please check all that apply):

_____ Letter, on Second Harvest Letterhead

_____ Signed form

_____ Other: _____

By signing this Community Service Volunteer Agreement, I acknowledge that I have been truthful in disclosing my offense listed above. I have read and understand the requirements of this volunteer opportunity and further understand that I may be excused from this opportunity at any time and for any reason. If I am excused I understand that the contact named above from my referring county may be contacted.

Date Volunteer Signature

