

### Staff Volunteer Activity Request Form

Name of Volunteering Employee: \_\_\_\_\_

Job Code/Title of Volunteering Employee: \_\_\_\_\_

Facility/District/Unit Submitting Form: \_\_\_\_\_

Name, Phone Number, and E-mail of Person Submitting Form:  
\_\_\_\_\_

List employee's regularly assigned job duties (**limit** to 10 most important job functions):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Attach the job description for the volunteer position to this form and send to:**

Oklahoma Department of Corrections  
Human Resources Unit  
3400 Martin Luther King Avenue  
P.O. Box 11400  
Oklahoma City, Oklahoma 73136-0400

---

**DO NOT WRITE BELOW THIS LINE (Central Human Resources UNIT USE ONLY)**

Approved  
 Not approved:  
Reason: \_\_\_\_\_  
\_\_\_\_\_

Human Resources Unit – Signature/Date: \_\_\_\_\_