U.S. DEPARTMENT OF COMMERCE NATIONAL OCEANIC AND ATMORSPHERIC ADMINISTRATION

NOAA VOLUNTEER DIVER SERVICE AGREEMENT

1. NAME OF AGENCY	2. AGREEMENT NUMBER
3. NAME OF VOLUNTEER (Last, First)	4. U.S. CITIZEN OR PERMANENT RESIDENT ☐ Yes ☐ No, list visa type
5. STREET ADDRESS	6. CITY, STATE, ZIP CODE
7. EMAIL ADDRESS	8. PHONE Home Mobile
9. AGE ☐ 18-39 ☐ 40-49 ☐ 50-59 ☐ 60 and Older	

10. **ETHNICITY & RACE (Optional):** Please report both ethnicity and race and tell us if you are a veteran or have a disability. Multiracial respondents may select two or more races. This information will inform our understanding of diversity among the volunteer force in the NOAA Diving Program.

10a. ETHNICITY ☐ Hispanic or Latino ☐ Not Hispanic or Latino	10b. RACE ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ White ☐ Native Hawaiian or Other Pacific Islander	10c. Are you a Veteran? ☐ Yes ☐ No 10d. Do you have a disability? ☐ Yes ☐ No

EMERGENCY CONTACT INFORMATION

11. NAME (Last, First)	12. PHONE Home Mobile	13. EMAIL ADDRESS
14. STREET ADDRESS	15. CITY, STATE, ZIP CODE	16. RELATIONSHIP TO VOLUNTEER

GOVERNMENT OFFICIAL COMPLETES THIS SECTION

17. AGENCY CONTACT NAME (Last, First)	18. PHONE Office Mobile	19. EMAIL ADDRESS

20. REIMBURSEMENTS APPROVED? ☐ Yes ☐ No Type and Rate of Reimbursement:

21. **Description of service to be performed.** Provide a brief description of volunteer activity and the location of the volunteer activity to be performed. Description should include details such as time and schedule commitment, use of government vehicle, use of personal diving equipment and/or vehicle, skilles required (include diving and safety certifications required), level of physical activity required, etc.

22. Check all that apply:
☐ Additional description of service attached
☐ Job Hazard Analysis
☐ Diving and safety certifications verified
☐ Driver's License verified (if required)