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 Organization Name

## Volunteer Labor Checklist

	Yes	Needs Attention
1. Do you hire professionals for large or complex construction or demolition jobs?	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you instruct volunteers on safe work procedures and the safe use of all equipment?	<input type="checkbox"/>	<input type="checkbox"/>
3. Do you designate project leaders who understand the importance of safety and who will be alert to unsafe behavior that could result in injury?	<input type="checkbox"/>	<input type="checkbox"/>
4. Do you designate project leaders who understand/have expertise in the particular area of remodeling/construction you are undertaking?	<input type="checkbox"/>	<input type="checkbox"/>
5. Do you enlist only those volunteers who are skilled and physically capable of undertaking the work assignment required of them?	<input type="checkbox"/>	<input type="checkbox"/>
6. Do you prohibit minors from undertaking tasks OSHA does not permit them to perform as employees?	<input type="checkbox"/>	<input type="checkbox"/>
7. Do you ask potential volunteers about the medical coverage they carry prior to allowing them to work on the project at hand?	<input type="checkbox"/>	<input type="checkbox"/>
8. Did you discuss potential workers' compensation exposure with your insurance agent?	<input type="checkbox"/>	<input type="checkbox"/>
9. Do you consult with your attorney before embarking on a volunteer labor project to make sure all potential liability exposures have been addressed?	<input type="checkbox"/>	<input type="checkbox"/>
10. Do you ask your volunteer laborers to sign an Activity Participation Agreement to indemnify, defend, and hold the ministry harmless against liability claims resulting from the activities they will be working on?	<input type="checkbox"/>	<input type="checkbox"/>
11. Do you have emergency response procedures, including notification of authorities and parents?	<input type="checkbox"/>	<input type="checkbox"/>
12. Do you have written, job-specific safety training guides?	<input type="checkbox"/>	<input type="checkbox"/>

Notes: \_\_\_\_\_

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

This is a sample document only. Your organization is responsible for compliance with all applicable laws. Accordingly, this checklist should not be used or adopted by your organization without first being reviewed and approved by a licensed attorney in your state. Brotherhood Mutual Insurance Company assumes no liability in the preparation and distribution of this checklist.