



## Wednesday, September 20th, 2017

United Way of Mahaska County (UWMC) invites you to participate in our **10<sup>th</sup> Annual Day of Caring** on **September 20, 2017!** On this day, we hope to have a business or civic organization complete a meaningful project for your agency.

Day of Caring exemplifies Living United when business partners join with local civic and community groups to help those in need in the Oskaloosa community.

There are so many benefits to your agency uniting with our community on Day of Caring. Prior to September, we will strive to match your organization with volunteers that will be able to complete a project of your choosing. We encourage you to submit as many projects as needed. There are no guarantees on every project being matched. We will try to accommodate your preferences.

All entries must be submitted either in person at United Way of Mahaska County, 500 High Ave W, Oskaloosa, IA 52577, faxed to (641) 672.1169, or emailed to e-mail [uwmc.coordinator@gmail.com](mailto:uwmc.coordinator@gmail.com), **no later than September 1<sup>st</sup>, 2017.** All forms must be completed in their entirety. Contact Timothy Gibson at (641) 673.6043 for more information.

***NOTICE: The Day of Caring Committee cannot approve any projects involving roof work due to safety and liability issues.***

Together, united, we can inspire hope and create opportunities for a better tomorrow.

That's what it means to **LIVE UNITED.**



# DAY OF CARING – SEPTEMBER 20, 2017

## PROJECT REQUEST FORM



United Way of Mahaska County  
UnitedWayMahaska.org

Please complete, in full, one form for each separate project request.

Name of Organization/Resident: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Agency Contact: \_\_\_\_\_

Email: \_\_\_\_\_ Project Coordinator: \_\_\_\_\_

Coordinator Cell (for 9/20 use only): \_\_\_\_\_ Project Location: \_\_\_\_\_

**Project Description:** Please be as specific as possible. These descriptions are used to help United Way match your project with a volunteer team. Include the type of work (*heavy lifting, moving, etc.*), what type of skills are needed (*painting, climbing, etc.*), and where the work will be done – outdoors, indoors, with clients, with other volunteers, off-site, etc. Attach an additional page if needed.

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\_\_\_\_\_ Are there any confidentiality/ liability issues concerning the project, location or clients?

Plan for inclement weather: \_\_\_\_\_

Will debris need to be hauled away? \_\_\_\_\_ First Aid Kit (Y/N): \_\_\_\_\_

**Project Length:**  Full-Day (8AM–5 PM) **OR** Half Day:  Morning(8AM–12PM)  Afternoon (1PM– 5PM)

**Project Will Take Place:**  Indoors  Outdoors

**Number of Volunteers Required:** At least \_\_\_\_ No more than \_\_\_\_ Can you supply water/snacks: \_\_\_\_\_

Specific skills/clothing required: \_\_\_\_\_

Tools/Supplies Provided by You: \_\_\_\_\_

Additional Tools/Supplies Needed (*United Way will address these needs*): \_\_\_\_\_

Notes (*ex: volunteers exposed to poison ivy, allergy issues, or pregnant that could be affected by the project*):

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**Lunch will be provided at a location to be determined from 11:30 AM to 12:30 PM. Please RSVP if you would like to attend. Number in attendance: \_\_\_\_\_**