

**MARYLAND DEPARTMENT OF THE ENVIRONMENT  
OFFICE OF THE SECRETARY**

**VOLUNTEER CONSENT FORM**

**Thank you for being a MDE Volunteer!**

Name of Volunteer \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone Number \_\_\_\_\_

Email Address \_\_\_\_\_

**FOR YOUR INFORMATION:**

All registered volunteers with the State of Maryland are covered for liability under the Maryland Tort Claims Act and for accidents arising from volunteer work up to the amounts of coverage provided by State insurance.

A minor under the age of 14 will not be allowed to serve as a volunteer. Minors 14 through 17 years of age require consent of a parent or legal guardian.

*I acknowledge that I have read and understand the above information and understand that by signing this statement I am considered a MDE volunteer.*

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent of Legal Guardian of Minor Volunteer

\_\_\_\_\_  
Date

**Note:** Section 2-207 of the State Personnel and Pensions Article of the Maryland Annotated Code explicitly prohibits a State employee from supervising the employee's parent, spouse, sibling, or child.

**Send Original to:**

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Operational Services Administration  
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Baltimore, MD 21230  
[Nadine.Jackson-bey@maryland.gov](mailto:Nadine.Jackson-bey@maryland.gov)