employee eligibility section one

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Employee to complete : : PLEASE PRINT OR TYPE

☐ individual application ☐ team application

PSEG company where volunteer works:

☐ PSE&G ☐ PSEG Services ☐ PSEG Energy Holdings

☐ PSEG Power ☐ other PSEG company

volunteer or team leader's name (last, first, mi)

employee # date employed

position/title department

mail code cost center company phone

home address

city state zip code

county home phone

e-mail

How long have you been a volunteer with this organization?

Approximately how many hours per year does the volunteer or team leader serve? (min. requirement: 50 hrs/yr) _____

Provide a one-sentence description of the volunteer activity:

I hereby certify that I do not receive compensation for my volunteer service, and that the information contained in this document is true and accurate to the best of my knowledge.

volunteer or team leader's signature date

nominator's name, if different (please print)

name of volunteer's supervisor/manager (please print)

remember to include:

☐ 1 - 2 page narrative of volunteer efforts

☐ information on team members (teams only)

section two organization eligibility

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Nonprofit organization to complete : : PLEASE PRINT OR TYPE

name of organization ein #

address

city state zip code

county phone

fax e-mail

web site

I certify that the employee has performed the volunteer services and hours as described. With this application I have provided:

☐ copy of organization's IRS 501(c)(3) determination

☐ one-page description of nonprofit organization

☐ one-page letter of support for the efforts of volunteer(s)

name of officer (please print)

title

signature date

name of head of organization, if different than above (please print)

title

Please return application and all attachments by July13, 2007 to:

PSEG – Corporate Responsibility

Recognizing Excellence in Volunteerism Program

80 Park Plaza, T-10C, Newark, NJ 07102

www.pseg.com/community