



**FRM-105A
Change of Project Site Staff**

SITE STAFF: COMPLETE FORM AND RETURN BY EMAIL TO WSC

Member Name: _____

Sponsoring Organization: _____

Project Site (if different than Sponsoring Organization): _____

Effective Date: _____

The Project Site Staff for this member will be:

Primary Site Staff

Name: _____

Email: _____

Phone: _____

- I agree to take on the responsibility of primary site staff for this WSC AmeriCorps Member.
- I will complete the site staff trainings assigned to me in WSC's LMS within 14 business days.
- I understand the responsibilities of this position as required in the Member Service Agreement, the Member Placement Contract, and all WSC Policies.

X

Primary Site Staff Signature

Secondary/Backup Site Staff

Name: _____

Email: _____

Phone: _____

- I agree to take on the responsibility of secondary/backup site staff for this WSC AmeriCorps Member.
- I agree to meet with the Primary Site Staff and WSC Coordinator within 14 business days.
- I understand the responsibilities of this position as required in the Member Service Agreement, the Member Placement Contract, and all WSC Policies.

X

Secondary/Backup Site Staff Signature

Name of Project Site Staff who will approve member timesheets _____

Name of Project Site Staff who will submit quarterly reports _____

Member:

I understand that the Project Site Staff listed in my Position Description Form has changed as noted above. I further understand that the rest of the Position Description Form remains in effect as it is currently written.

X

Member Signature