

Division Head's (print)

Volunteer Request Form

I am requesting approval to obtain a Volunteer(s) for the following date(s) and event:

| Date and Description of Frants | Click have to enter to: t | |
|---|--|---|
| Date and Description of Event: | Click here to enter text. | |
| Reason for Requesting a Volunteer: | Click here to enter text. | |
| I understand that I am accountable for reputation, service-level and quality of | ensuring the Volunteer is a responsible party w work expected at this University. | ho will uphold the values, |
| I understand the use of a Volunteer car | nnot displace or reduce the hours worked by re | gular employees. |
| I understand it is my responsibility to re signed copy to Human Resources prior | eview the Volunteer Waiver form with the Volunto to the date of the volunteer event. | nteer and to provide the original |
| · · · · · · · · · · · · · · · · · · · | nsure a criminal background check release form derstand that results will be held to the same s | • |
| services. I further understand that the | ceive no pay, benefits or other privileges of emp Volunteer is not eligible for worker's compensa | ntion benefits if injured or |
| becomes ill as a result of the volunteer volunteer assignment ends. | work and is not eligible for unemployment con | ipensation benefits when the |
| volunteer assignment ends. I CERTIFY THAT I HAVE EXPLAINED THE | ABOVE TO THE VOLUNTEER AND THAT I HAVE I | NOT PROMISED THE VOLUNTEER |
| volunteer assignment ends. I CERTIFY THAT I HAVE EXPLAINED THE | ABOVE TO THE VOLUNTEER AND THAT I HAVE I | NOT PROMISED THE VOLUNTEER |
| Volunteer assignment ends. I CERTIFY THAT I HAVE EXPLAINED THE THAT HE/SHE WILL RECEIVE A PAID POST | ABOVE TO THE VOLUNTEER AND THAT I HAVE IS | NOT PROMISED THE VOLUNTEER |
| I CERTIFY THAT I HAVE EXPLAINED THE THAT HE/SHE WILL RECEIVE A PAID POS Requestor's Name (print) As the supervisor for this department, I and approve this request. | ABOVE TO THE VOLUNTEER AND THAT I HAVE ISTION AS A RESULT OF THE VOLUNTEER WORK Requestor's Signature | NOT PROMISED THE VOLUNTEER |
| I CERTIFY THAT I HAVE EXPLAINED THE THAT HE/SHE WILL RECEIVE A PAID POS Requestor's Name (print) As the supervisor for this department, I and approve this request. Department Head's Name (print) | ABOVE TO THE VOLUNTEER AND THAT I HAVE ISTITION AS A RESULT OF THE VOLUNTEER WORK Requestor's Signature have reviewed the above information with the | NOT PROMISED THE VOLUNTEER Date person requesting a Volunteer Date |

Division Head's Signature

Date