



WILKES UNIVERSITY

VOLUNTEER AGREEMENT

We are pleased that you have decided to volunteer your services to Wilkes University and the Department of _____ (hereinafter referred to as "Wilkes"). Please affirm your acceptance of the terms of this agreement, stated below, with your signature. Also, please accept our sincere thanks for your valuable contribution to Wilkes University.

- 1) I am volunteering solely for personal purposes or benefit without promise or expectation of compensation, benefits or future employment from the University beyond any specified reimbursements agreements. I agree that as a University volunteer my participation in the activities outlined in the attached Description of Volunteer Duties is without valuable consideration. That document shall be considered a part of this agreement.
- 2) I understand that my services will be performed under the direction and control of the _____ Department and that I must abide by all University policies and procedures while performing my volunteer services.
- 3) I understand that the University shall have the right to release me as a volunteer without prior notice. I understand that I do not have a formal work appointment for those particular services.
- 4) I understand that as a University volunteer, Wilkes does not provide me with accident or medical insurance, and is therefore not responsible for any accident or medical expenses incurred by me. Further, I understand that I am neither covered by Workers' Compensation nor entitled to employee benefits as a result of my University volunteer affiliation.
- 5) Wilkes agrees to provide me with third party liability insurance to protect me from any claims filed against me related to the duties described in the attached Description of Volunteer Duties. In exchange, I, on behalf of myself, my heirs, and my representatives do hereby release, indemnify, and hold harmless Wilkes or any of its officers, agents, or employees from any and all liability, damage, or claim of any nature that arises out of or related to my volunteer activities.
- 6) I am aware of the terms and conditions of this agreement and am signing this agreement of my own free will. I affirm that I have not been convicted of a Felony or other violent crime. Further, by signing this agreement I attest to the fact that I am eighteen years of age or older. I understand that the University reserves the right to perform background checks on any volunteer and I consent to any such background check.
- 7) This agreement is valid from _____ to _____.

Volunteer's Signature _____ Date _____

Home Address _____

Phone Number _____

Department Sponsor Signature: _____ Date _____

University Representative Signature _____ Date _____