

COLLEGE OF THE ENVIRONMENT VOLUNTEER SERVICE AGREEMENT

SECTION I: VOLUNTEER INFORMATION (to be completed by volunteer)									
Volunteer's Last Name:			First Name:		Middle Name:			Date of Birth:	
Volunteer's Street Address:		City:	State:		State:	Zip:			
Phone Number: Email:		Email:			Emergency Contact Name:		Name:	Emergency Contact Phone Number:	
Are you employed at the UW? Please circle one. Yes No If yes, provide department, position, current FTE and a brief description of duties & responsibilities:									
Disclaimer: I understand that my volunteer service is unpaid and I do not expect a paid position in the future or any other tangible benefit in return for my volunteer service. I further understand that the College of the Environment may terminate this agreement at any time without prior notice.									
Volunteer's Signature: Date:									
SECTION II: VOLUNTEER WORK DETAILS (to be completed by supervisor)									
Volunteer Start Date:	End Date:			Supervisor(s) Responsible for Volunteer:					
Supervisor Phone:	Supervisor Email:			Unit(s)/Project(s) where volunteer will provide service:					
Description of duties & responsibilities of the volunteer:									
As the supervisor to the volunteer listed in Section 1, I agree to oversee the volunteer's training and activities. The volunteer is authorized to serve based on his/her visa status. I also agree to document the dates and hours of the volunteer's services to the College.									
Supervisor Signature:	Date:								
I understand that performing volunteer service on a visa that does not permit work may subject the University to significant fines and negatively affect the visa holder's status. I am authorized to perform volunteer service because I hold a visa or a visa and an Employment Authorization Document.									
Volunteer's Signature:				Date:					

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