

DATE

[name]
[address]
[address]
[address]

Dear [name of volunteer]:

This letter is to confirm the terms of your relationship with Drexel University as a volunteer. Your volunteer assignment is scheduled to begin on _____ and end on _____.

In accepting the volunteer assignment, you have agreed to the following:

1. You are at least 18 years of age.
2. As a non-employee volunteer, your work with the University will be uncompensated. You are ineligible to participate in any of the University's employee benefits programs, including but not limited to unemployment compensation, workers compensation, retirement, or sick leave.
3. If required by the nature of your assignment, you agree to submit to a physical examination, immunizations, and training on safety and infection control. You may be required to submit to a test for drugs and controlled substances.
4. You and your supervisor will determine the scope of your assignment and you agree to work within that scope at all times. You and your supervisor have agreed that you will perform the following activities while serving as a volunteer at the University:

Your Supervisor is _____. You will follow your Supervisor's instructions at all times.

5. The University assumes no responsibility for any activities outside the scope of your volunteer assignment.

6. You are not authorized to act in any way on behalf of Drexel University in business matters, including purchasing property, signing contracts, leases or other agreements, hiring or supervising employees or otherwise attempting to bind the University to any agreement. You do not have the authority to speak publicly on behalf of the University.

7. In accepting this assignment, you agree to assume any risks associated with performance of your volunteer activities and you agree to release the University from any and all liability for damages to you or your personal property which may result from your volunteer assignment.

8. You agree to provide proof of health insurance coverage. The University will not pay any medical costs if you are injured or become ill as a result of your volunteer assignment.

9. If required by the nature of your assignment, you agree to a professional background check, which may include criminal history, employment history, educational history and background, and credit history.

10. You agree to comply with all Drexel University policies, including policies on Confidentiality, Appearance, and the use of Electronic Mail as published on Drexel University's website under Human Resources Policies and Procedures, and, as applicable, the policy on the Conduct of Research as published on the University's website under Research Programs. You are responsible for reading these policies and making inquiries if you have questions.

11. Both you and the University can terminate your volunteer assignment at any time and for any reason upon written or verbal notice to the other.

12. You agree to comply with the following additional provisions as required by your department:

Sincerely,

(Supervisor)

To signify your acceptance of these terms, please sign, date, and return this letter to your supervisor.

Signature

Date

Supervisor: Please send signed original document to Human Resources. Retain a copy for your files.