



Office of Human Resources

Southern University Volunteer Agreement

We are pleased that you have decided to volunteer your services to the Southern University and the _____ (insert name of Department or Unit).

Please affirm your acceptance of the terms of this agreement, stated below, with your signature. We extend our sincere thanks for your valuable contribution to the University.

1. I agree that my participation in the activities outlined in the attached Description of Volunteer Duties (which is part of this agreement) is not in exchange for any consideration (e.g., pay, benefits, the promise of future employment). I acknowledge that, in exchange for my service as a University volunteer, I have neither been promised any consideration nor do I expect to receive any consideration.
2. I agree that I will comply with all University rules and regulations applicable to my presence at the University and that I will follow the directions and guidance of the department, my supervisor and/or any principal investigator directing my volunteer assignment. I likewise agree to follow any schedule established in connection with my volunteer assignment.
3. I agree that, as a University volunteer, I will not be a University employee. I understand and agree that the University and I both have the right to end my volunteer relationship with the University at any time, for any reason, and without advance notice.
4. I understand that as a University volunteer, I will not be entitled to any employee benefits. In this regard, I understand that the University will not provide me with accident or medical insurance, and is therefore not responsible for any accident or medical expenses that I incur in the course of volunteering. I also understand that I am not covered by workers' compensation laws in connection with my University volunteer affiliation. Further, I certify that I have health and/or accident insurance that will cover any personal injury that I may sustain while providing volunteer services and/or using University facilities and equipment, regardless of cause, and I agree to provide proof of such insurance upon request.
5. The University agrees to provide me with third party general liability insurance for claims filed against me arising from my duties described in the attached Description of Volunteer Duties.



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6. In exchange for third party liability insurance and the opportunity to be a University volunteer, on behalf of myself, my heirs, and my representatives, I hereby release, indemnify, and hold harmless the Southern University and all of its officers, trustees, agents, and employees from any and all liability, damages, or claims of any nature that arise out of or related to my volunteer activities. I also acknowledge there is a risk of injury from volunteering and using the University facilities and equipment, including the potential for serious injury and death, and I hereby voluntarily assume the risk of any injuries (regardless of severity) and death, which I may incur due to negligence or accidental occurrences while I am volunteering.
7. I am aware of the terms and conditions of this agreement and am signing this agreement of my own free will and without pressure or coercion. Further, by signing this agreement I attest to the fact that I am at least eighteen years of age and that I am competent to sign this agreement and release.
8. I agree that this agreement (along with the Description of Volunteer Services) sets forth the entire agreement between me and the University regarding my service as a University volunteer and supersedes any written or oral understanding, promise or agreement that is not referred to and incorporated in this agreement. I agree that this agreement shall be governed by Louisiana law and may be changed only in by a written document signed by me and an authorized University official.

Volunteer's Signature _____ Date _____

Volunteer's Printed Name _____ Phone _____

Home Address _____ E-Mail _____

Supervisor's Signature _____ Date _____

Supervisor's Printed Name _____

Human Resources Signature _____ Date _____