University Enterprises, Inc.
SACRAMENTO STATE
6000 J Street
Hornet Bookstore Bldg., Suite 3900
Sacramento, CA 95819-6063

Human Resources
(916) 278-7003
FAX (916) 278-4787
www.enterprises.csus.edu

VOLUNTEER SERVICE FORM

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Number: (_____) _____ (_____) _____ (_____) _____
Home Cell Work

Emergency Contact Name: _____

Emergency Contact Phone Number: (_____) _____

This is to acknowledge that I desire to volunteer my services as outline below.

Department: _____Start Date: _____ End Date: _____

Description of Volunteer Services: _____

_____

_____

_____

Number of hours expected to volunteer per week: _____

Sample hourly pay rate **IF** volunteer were to be paid $_____hr.

I understand that I am not a University Enterprises, Inc., employee, and will receive no compensation for my services. I also understand and agree to hold University Enterprises Inc., harmless of any and all injuries that I might sustain in the course of my volunteer services. I understand I am covered on the UEI Workers' Compensation policy.

Volunteer operating a vehicle: If the volunteer service requires the volunteer to operate a University Enterprises, Inc., vehicle, a rental vehicle or their personal vehicle to conduct business, the volunteer must be cleared by the University Enterprises, Inc., Human Resources department (refer to "Proof of Insurance" information on web site for further instructions).

For ARC Volunteers: I _____verify that any and all field hours that I choose to provide on behalf of the Archaeological Research Center (ARC) on _____ is as a volunteer and is being performed for civic, charitable, or humanitarian reasons, without promise, expectation or receipt of compensation for services rendered, that I am volunteering freely and without pressure or coercion, direct or implied, from University Enterprises, Inc (UEI), and that my services are being performed voluntarily and not at the request or direction of UEI.

_____ _____
Volunteer Signature Date

_____ _____
Manager/Project Manager Signature Date