Social & Environmental Entrepreneurs

(SEE) Volunteer Application Form

Volunteer:		
Last Name:	First Name:	
Parent or Guardian:		
Last Name:	First Name:	
*If applicant is under 18 years of \underline{c}	age the parent or guardian must sign this	agreement.
Address:		
Telephone:	Email Address:	
Company or Volunteer Group Nam	ne:	
	Drivers License No. and Sta	
Emergency Contact Name & Relat	tionship:	
Emergency Contact Telephone Nu	mber:	
	embers who are employed or volunteer he	
Types of volunteer work you are m	nost comfortable performing:	
Helping with a group activity _	Helping with an event	
Helping on a regular basis(Other	
I need the following accommodation	on(s) to work as a volunteer:	
List Your Past Volunteer Experienc	ces:	
Organization:	Duties:	Mo/Yr to Mo /Yr

Organization:	Duties:	Mo/Yr. to Mo./Yr
BACKGROUND CHECK: Social and Er		eurs requires volunteers working with youth,
	•	onviction does not necessarily bar an applicant
_		onsideration before a decision is made. There is
_		eening must be completed before volunteers
begin working with projects.	oacaground check. Sci	cening must be completed before volunteers
degin working with projects.		
I agree to have a background check	k.	
I agree to forward results from my	most recent Mantoux t	est from my physician within two weeks
of the date on this application.		
or are date on any approacher.		
REFERENCES: List two people, not rela	ted to you who have kn	owledge of your qualifications.
Name:		
Telephone Number:		
Name:		
Telephone Number:		
•		
and that Social and Environmental Entrep for any reason. I hereby authorize Social a understand that a criminal background ch	at I will receive no mor oreneurs may terminate and Environmental Ent eck is required.	netary benefits in return for my volunteer service this agreement at any time without prior notice
	•	orably. I understand that any misrepresentation
or omission of facts on this application of		
or omission of facts on this application co	outd be cause for rejecti	on or ans appreciation of distinssar.
I understand that after I submit my applic determined. I agree to an interview and or	•	ed and my eligibility for volunteer work will be y volunteer role.
I hereby Release and Waive liability again	est Social and Environr	nental Entrepreneurs., a non-profit corporation,
		ssigns, for any injuries or illness that I myself
or my dependent may suffer in connection		
	•	strepreneurs, is not liable for any damage to my
property or my dependent's property results broad and inclusive as permitted by the la	_	_
broad and inclusive as permitted by the la	iws of the state of Call	Dillia.
Volunteer Signature:		
Guardian's Signature (if under 18):		Date:

Social & Environmental Entrepreneurs

(SEE) Volunteer Agreement and Release from Liability

1. I,	[full name of volunteer], agree to work for Social and
Environmental Entrepreneurs [Nonprofit]	as a volunteer.

- 2. As a volunteer, I understand that I control the dates and times when I do the work and that [Nonprofit] is not responsible for scheduling my volunteer work. I also understand that I will not be compensated for any time spent volunteering, nor am I entitled to benefits, including employment insurance benefits upon the termination of this agreement or as a result of this service.
- I am voluntarily participating in this activity with knowledge of the hazards and potential dangers involved, and agree to accept any and all risks of personal injury and property damage.
- 4. As consideration for volunteering for [Nonprofit], I hereby agree that I, and my assignees, heirs, guardians, and legal representatives, will not make a claim against or sue [Nonprofit] or its employees, agents or contractors for injury or damage resulting from the negligence, whether active or passive, or other acts, however caused, by any of its officers, employees, agents, or contractors of [Nonprofit] as a result of my volunteering. I HEREBY RELEASE AND DISCHARGE [NONPROFIT] AND ITS OFFICERS, EMPLOYEES, AGENTS AND CONTRACTORS FROM ALL ACTIONS, CLAIMS, OR DEMANDS THAT I, MY HEIRS, GUARDIANS, AND LEGAL REPRESENTATIVES NOW HAVE, OR MAY HAVE IN THE FUTURE, FOR INJURY OR DAMAGE RESULTING FROM MY PARTICIPATION IN THE PROJECT.
- 5. I UNDERSTAND THAT IF I AM INJURED IN THE COURSE OF THE PROJECT, I AM NOT COVERED BY [NONPROFIT]'s WORKERS' COMPENSATION PROGRAM. I authorize [Nonprofit] to seek emergency medical treatment on my behalf in case of injury, accident or illness to me arising from my involvement as a volunteer. I understand that I will be responsible for medical costs incurred by such accident, illness or injury.
- 6. I agree and understand that injuries or losses to others, such as co-volunteers or the person(s) being helped, may occur as a result of my negligent or intentional acts during volunteer service, and that to avoid such harm, I must exercise care and act responsibly in serving others.
- 7. If any injury or loss to another does occur due to my intentional actions or due to my negligent actions arising outside of the scope of my volunteer activities, I will accept the liability for and repair, or make reparations for, the harm done.
- 8. I understand that the materials and tools provided by [Nonprofit] are and remain the property of [Nonprofit], and I agree to return these tools and any remaining materials to [Nonprofit] at the end of my volunteer service.

Date	Volunteer Signature
	Printed Name
Date	[Nonprofit] Representative Signature
If you have in sunder 10 years o	Printed Name f age, a parent or guardian must read and sign the following:
•	r age, a parent or guardian must read and sign the following: nd assumption of risk have been explained to and are understood by the minor.
Date	Parent or Guardian Signature
	Printed Name

9. I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS.

I AM AWARE THAT THIS IS A RELEASE OF LIABILITY, AND SIGN IT OF MY OWN FREE WILL.