VOLUNTEER SERVICE STATEMENT & AGREEMENT

Caution: This is a release of legal rights. Read and understand it before signing.

I, ______________________, make this Statement and Agreement in order to provide, and to be authorized to perform, the following uncompensated services to ____________________ College (“College”), a college in the Maricopa County Community College District (“MCCCD”).

I ______________________, will be volunteering from ___________ to ___________ for the following services:

The department or official with official oversight authority of the work is:

In consideration of the opportunity afforded to me to perform the above referenced volunteer services, I hereby agree as follows:

1. That I am 18 years of age or older and know of no reason, medical or otherwise, which would prevent me from performing the tasks required;

2. That I have acquainted myself with what is required to perform those tasks, and represent that I have the skill and ability to perform them.

3. That I am not an employee of the MCCCD and that no medical insurance benefits are provided to me.

4. That I will perform the volunteer service in compliance with the standards and specifications established, or approved, by the College, and will honor the direction of the College Officials to suspend or terminate service.

I have read and understand this Volunteer Service Statement and Agreement and I sign it of my own free will.

________________________________________  __________________________________
Volunteer Signature                     Date