

Volunteer's Release/Appointment Form

To be completed by the Account Manager (For the area in which volunteer provides services):

Volunteer's SSN*: _____ - _____ - _____

Volunteer's Name: _____
(first) (m.i.) (last)

Acct. # & Dept. Name: _____
(account number) (department name)

Effective Dates: Start _____ - _____ - _____ End _____ - _____ - _____
(month) (day) (year) (month) (day) (year)

Hours Per Week: _____

Job Duties : _____

Supervisor: Name _____ Telephone Number _____

Releases: The Board of Regents, Texas State University System, Texas State University (Texas State), the supervisor named above, and all employees and agents of Texas State, acting officially or otherwise.

Volunteer's Statement:

Services: During the time specified, I will be performing volunteer services described above for Texas State.

Volunteer During this period I will not be an employee or agent of Texas State and will not be paid for my services or be eligible for Status: employee benefits, including workers' compensation benefits.

Release: In consideration for Texas State providing me this opportunity, I (for myself, my heirs, executors, and administrators) release, discharge, and agree not to sue the Releases named above for any claim that I may have arising from my volunteer status. This release includes claims for injuries to me (including my death) and damage to my property that may occur from any cause during the period of my service.

Employment I certify that I am (check one):

Status: Not employed by the State of Texas, Texas State University, or the Texas State University System. I am performing the proposed volunteer service for charitable, civic or humanitarian reasons.

An employee of the State of Texas, Texas State University or the Texas State University System. The proposed volunteer service is in a different occupational capacity from that in which I am employed, and I am performing the volunteer service for civic, charitable or humanitarian reasons. My employment at Texas State is as follows:

Account Manager: _____

Job title: _____

Free Act: I have read this release and understand it. I sign it voluntarily as my own free act. No person has made any additional representations to induce me to sign this agreement. I execute this agreement having received full and adequate consideration for it, intending to be bound by it and by Texas law.

Volunteer's Signature

Date

Account Manager's Signature**

Date

*Social security numbers may be required only if any reimbursements are necessary.

**The account manager must keep a copy of the signed release on file for two years after the last date of service. 04/04/2002