University of Iowa Volunteer Authorization

Volunteer Name:

Address:  

Email:

Start Date:  

End Date:

Authorizing Department or Commission:

Responsibilities (Volunteer Services Description):

Signature  

Phone Number

Departmental Supervisor

Volunteer Information

You are a Volunteer if you provide services to or on behalf of the University and have no legal duty to do so, have no personal interest or gain from the activity, and receive no compensation or consideration (except expense reimbursement) for the services you provide.

Criminal Background Check: In connection with your application to volunteer at The University of Iowa, a criminal background check may be requested or made on you.

Liability Coverage: Subject to the determination of the Iowa Attorney General in a particular case, Chapter 669 of the Code of Iowa provides for defense and indemnification of University of Iowa employees, volunteers and agents while they are acting within the scope of their authorized volunteer duties, and while under the direction and supervision of the University.

Health & Safety: The University cannot guarantee an environment free of the risk of transmission of COVID-19. Your volunteer role may include possible exposure to and illness from infectious diseases including but not limited to COVID-19. In addition, due to the nature of our facilities, services, and programs offered, the University cannot ensure everyone’s compliance with CDC recommendations. Volunteers are expected to self-monitor their behavior and adhere to CDC recommendations on preventing the spread of COVID-19, including but not limited to physical distancing measures, the wearing of appropriate face coverings, and frequent handwashing. While cleaning efforts, special procedures, and personal discipline may reduce the risk of infection, the risk of serious illness, disability, and even death does exist and cannot be eliminated. All volunteers should consult with their personal health care provider before volunteering. By providing volunteer services, volunteers acknowledge and assume all risks related to exposure to COVID-19 or any other communicable disease, condition, or malady however defined, and agree to abide by all health and safety rules.
Use of Personal Autos Is Not Authorized: Generally, volunteers are not authorized to use their own personal vehicles in service to the University. However, if the volunteer is authorized in writing by the University to use their own personal vehicle, then the owner of the vehicle has primary financial responsibility for accidents. Therefore, if you are involved in an accident, the personal auto policy of the vehicle owner must respond.

Medical Coverage: Volunteers may be eligible for medical coverage for injury sustained during the course of their volunteer services. Note: If you are injured in the course of your volunteer duties please report the injury to your supervisor immediately.

Student Volunteers: If academic credit is received by the student for participating in a University event or providing services associated with the student’s academic study, the student is deemed to have a personal benefit in the activity. In these cases, the student is not covered by the University for medical coverage. The student must rely on his/her own personal health insurance to respond to illness or injury.

Volunteer Signature: ___________________________  Date: ___________________________

*If you are not 18 years old, this form must be signed by a parent or guardian.

I grant my child permission to volunteer for the University of Iowa as described above.

Parent/Guardian Signature: ___________________________  Date: ___________________________