MIAMI UNIVERSITY
Individual Volunteer Form

Miami University wishes to thank you for volunteering your valuable time, energy, and talents to the University. Your services will make a significant contribution to the University and our community.

Volunteer Position: _____

(Attach copies of any required licenses, certificates, and/or authorizations to act)

Name of Volunteer: _____

Address: _____

_____

Telephone Number: _____

In the event of an emergency, please contact: _____

Emergency Telephone Number: _____

Anticipated dates and times of volunteer services: _____

_____

_____

I, _____ desire to volunteer at Miami University as a _____. I acknowledge that I am providing these services on a purely voluntary basis and that I will not be paid for these services. I understand that volunteering does not entitle me to any preference or any paid employment position at Miami University, and that Miami may decline my volunteer services at anytime.

_____

Signature of Volunteer Date