STATEMENT OF UNDERSTANDING/AGREEMENT BETWEEN

EAST TENNESSEE STATE UNIVERSITY AND

(VOLUNTEER NAME)

- 1. The volunteer understands that he/she is not to be considered an employee, agent or independent contractor employed by the University for any purpose of this assignment. The volunteer acknowledges that he/she will neither accept nor claim entitlement to any salary/benefits of employment, including but not limited to insurance, retirement benefits, worker's compensation, travel expenses, or any other form of compensation of any kind.
- 2. The volunteer understands that he/she has no actual authority to bind or represent the University with regard to any third parties. Moreover, the volunteer agrees to avoid giving the impression of having apparent authority to bind or represent the University with regard to third parties. Accordingly, the volunteer may not sign or enter into any agreement or contracts on behalf of the University.
- 3. The volunteer understands that provisions of the Tennessee Code Annotated [T.C.A. § 9-8-307(h) and T.C.A. § 8-42.101(3)(B)] extend certain protections to individuals who are participants in volunteer programs which are operated under the authorization of a state agency or department. For actions taken in the course of performing volunteer services, which are neither willful, malicious nor criminal, or acts or omissions done for personal gain, an authorized volunteer is immune from suit in the same manner as state employees. Persons injured by the actions of a volunteer are able to file a claim directly against the state.
- 4. The volunteer acknowledges that the University shall have no liability for personal injury or property damage which may be suffered by the volunteer, unless such injury or damage directly results from the negligent act or omissions of state employees or authorized volunteers. Any and all negligence claims shall be expressly limited to claims approved by the Claims Commission.
- 5. The volunteer acknowledges that he/she <u>may not</u> operate automotive or other state-owned equipment of the University without specific written authorization of the President of the University.
- 6. The volunteer and the University agree that no person shall be subjected to discrimination on the basis of race, color, religion, sex, age, handicap, or national origin in the execution or performance of this Agreement.
- 7. East Tennessee State University, the Tennessee Board of Regents, the State of Tennessee and their respective employees shall have no liability unless specifically provided for in this Agreement.
- 8. This agreement may be terminated at any time upon written notice of the volunteer or the President of East Tennessee State University.

ACKNOWLEDGMENT

I have read and understand the above statement/aga	preement and agree to abide by its terms and conditions wh	ile
I am participating in volunteer activities at East Tenn This agreement is effective from	nessee State University. (date) to(date	∍).
Name of Volunteer:		_
Volunteer's Physical Address:		
Street		
City	State Zip Code	_
Signature of Volunteer*If a minor (16-18 years of age), a parent must also s	sign Date	
	of Statement of Understanding/Agreement	
Name of Supervisor:	Supervisor Phone #:	
(please print or t	type)	
	Date	
(signature)		
Department:	Campus Box:	_
Background Check Needed? YES/NO Comple	eted by: Date:	
Approval of Statemen	nt of Understanding/Agreement	
President, or designee:	Date	_