



WESTERN'S VOLUNTEER PROGRAM
Volunteer Contract

As a volunteer (and current student) with Western's Volunteer Program:

1. I acknowledge that I may have access to confidential or proprietary information during the course of my work term. During and after my employment, I will hold all confidential information in trust and confidence, and I will not use, disclose, communicate or convey any such information, except as required in the performance of my role.

I will not allow any unauthorized person or persons to inspect or have access to any document that is of a confidential nature, regardless of media format, and I will report any unauthorized access to my supervisor as soon as I become aware that such an incident has occurred. I will not remove any records containing confidential information, unless authorized to do so by my supervisor and I will return such records upon termination of my assignment or as requested by my supervisor.

2. I will complete the following online training courses which are mandatory for all university employees including volunteers. I will obtain a Western certificate if not already certified and provide the course certificate(s) to my supervisor.
 - a. **WHMIS - Workplace Hazardous Materials. Information System.** Occupational Health and Safety offers two versions of WHMIS training for Western Employees – **Comprehensive** and **Basic**.
http://www.uwo.ca/humanresources/docandform/docs/healthandsafety/training/Which_WHMIS_version.pdf
 - b. **AODA - Accessibility in Service,**
 - c. **Employee Health and Safety Orientation** – Working Safely at Western.
 - d. **Safe Campus Community: Preventing Harassment, Violence and Domestic Violence at Western,** and
 - e. **Laboratory Safety – Hazardous Waste** – if working in a lab

Note: Access to the above courses will be available on your webCT account at <http://webct.uwo.ca/> a few days after your completed contract has been submitted to the WVP Coordinator.

POSITION TITLE: _____

Name of Student (Print)

Name of Supervisor (Print)

Signature of Student

Signature of Supervisor

Student UWO email address

Date

Date

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Program Duties and Expectations

1. While participating in the program, I will:
 - respect and follow the authority of my supervisor,
 - competently and efficiently carry out the duties and expectations assigned, and bring any problems or questions to my supervisor.
 - represent Western's Volunteer Program and Western through conduct in accordance with professional standards
 - participate in further position-related training that my supervisor requests, within the time commitment of the position
 - observe workplace specific and procedural safety standards as outlined by my supervisor (if applicable)
 - respect differences of gender, ethnic origin, race, religious affiliations, sexual orientation, and those with disabilities
2. I will arrive on time and fulfill the weekly time commitment agreed upon with my supervisor. If I must cancel a shift, I will notify my supervisor as soon as I become aware of the conflict and make arrangements to re-schedule missed time.
3. I will not arrive for a shift under the influence of alcohol or any illegal drug or substance.
4. I will not physically intervene in the event of a dangerous incident, but will remove myself safely from the situation and notify my supervisor and/or the campus police immediately (call 911).
5. If the volunteer position is in a hospital, I will be documented through the Volunteer Services offices of the host hospital.
6. While on duty, I will not violate any federal or provincial laws, municipal by-laws, or university policies governing conduct.
7. I understand that failure to comply with the terms of this contract may result in the termination of my position as a volunteer. I also understand that my supervisor reserves the right to relieve me of my duties if I do not comply with the terms of this contract.

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Register Student Volunteer

This form is used to establish a Western Identification Number for an individual who has a student volunteer role with Western. This identification number could be used to access services on campus including computer accounts, training courses, corporate data systems, libraries and buildings.

This access is granted only for administrative requirements for the period indicated below. Access must be approved by the supervisor of the student volunteer and by the individual in each department assigned to administer HR relationships e.g. Administrative Officer. The supervisor has an active faculty or staff appointment with Western usually in the same department as the student volunteer.

NOTE: Some personal data is required to determine if the individual has had a previous relationship with Western and to ensure they are re-issued the Western Identification Number and User ID when appropriate.

* Indicates this information is required

* POSITION TITLE:		
* UWO STUDENT NUMBER:	UWO EMPLOYEE NUMBER: (if applicable)	
* START DATE please fill: Year _____ Month _____ Day _____	* STUDENT NAME (FIRST) (MIDDLE) (LAST)	
*BIRTH DATE (YYYY-MM-DD)	* GENDER	*LAST 4 DIGITS OF SIN
COUNTRY	ADDRESS	
CITY	PROVINCE	POSTAL CODE
* END DATE please select √: Year _____ Month _____ Day _____ (No longer than 1 Year from start date)	*DEPARTMENT	*DEPT. CODE
*SUPERVISOR NAME (FIRST) (MIDDLE) (LAST)	SUPERVISOR ID (P/R USE ONLY)	
RELATIONSHIP TYPE: ZZ701 – Student Volunteer		

Department Authorization (Print)

Department Authorization Signature

Date

Please return completed contract to:

Dave Cano Tinoco, Community Engagement Coordinator
Western Student Services Building
WSS 3100

