

## JACKSON COMMUNITY COLLEGE

### VOLUNTEER EXPECTATIONS

Jackson Community College welcomes you as a volunteer. We hope that you find your volunteer experience to be both rewarding and educational. We would like to set forth guidelines to make sure you and the College have complete understanding as to our expectations with respect to your volunteer experience. Once you have read and understand the expectations, please sign the release form at the end and return it to the College.

#### Guidelines.

1. This is a volunteer experience. Accordingly, no compensation will be paid nor will any fringe benefits be provided.
2. If you are scheduled for volunteer service and are unable to attend, please provide the College as much notice as possible.
3. Volunteers are expected to adhere to all Jackson Community College standards and applicable rules.

#### Insurance Information.

Jackson Community College appreciates the time and efforts of those who volunteer their services. However, because you will be a “volunteer” and NOT an employee, you are NOT eligible for worker’s compensation benefits.

#### Criminal Background Check.

I understand that creating and maintaining a safe environment for employees, students, and other volunteers is a priority for Jackson Community College, and hereby grant them permission to complete a criminal background check to determine my suitability for a volunteer position.

#### Release and Waiver of Liability.

In consideration of the enjoyment, personal satisfaction and other valuable consideration I will receive while volunteering at JCC, the sufficiency of which I hereby acknowledge, I, for myself, my heirs, personal representative or assigns, **do hereby release, waive, discharge, and covenant not to sue Jackson Community College, its elected and appointed officials, directors and officers, employees, agents, or volunteers from any liability and all claims** including those resulting from the negligence of Jackson Community College, its elected and appointed officials, directors and officers, employees, agents, or volunteers resulting in bodily

injury or other personal injury, accidents, or illnesses (including death) and property loss arising from my participation as part of being a volunteer at JCC.

I have read this Release and Waiver of Liability and fully understand its terms. I further understand that **I am giving up substantial rights, including my right to sue.** I am signing this agreement freely and voluntarily, and intend by my signature below, to completely and unconditionally release Jackson Community College, its elected and appointed officials, directors and officers, employees, agents, or volunteers of all liability to the maximum extent permitted by law.

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Signature of Volunteer

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Date

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Printed Name of Volunteer

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Date of Birth

Please sign and complete the above and mail to:

Jackson Community College  
Attn: Human Resources  
2111 Emmons Rd  
Jackson MI 49201