College of Arts and Sciences

Office of the Dean

Date

As a research volunteer, I agree to abide by all guidelines and regulation of the University of Kentucky as follows:

1. The volunteer activities are being performed for the benefit of the volunteer to \_\_\_\_\_\_\_\_ (example: improve computational dru design skills).

2. The volunteer is performing these services freely and without any pressure or coercion, direct or implied, from the University of Kentucky.

3. The volunteer will not displace a current or previously paid position or perform tasks that are ordinarily performed by paid employees.

4. The volunteer will not receive or expect to receive any compensation from the University of Kentucky.

5. The volunteer will engage in volunteer activities \_\_\_\_ hours per week.

Volunteer activities start date: \_\_\_\_\_\_\_\_\_\_

Volunteer activities stop date: \_\_\_\_\_\_\_\_\_\_

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Printed Name of Volunteer Date Volunteer’s Signature

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Printed Name of Parent/Guardian Date Parent/Guardian Signature

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Printed Name of Supervisor Date Supervisor’s Signature

**Supervisor Contact Information**

Title:

Department:

Office/Lab Building and Room Number:

Phone:

Email: