

## **VOLUNTEER APPLICATION FORM**

	Applicant Information								
Name:	Email:								
ivaille.	Last		First						
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Address:	Street Address					Apart	ment/Unit#		
	City			Province/Sta	te	Postal Code			
Home Pho	one:			Cell Phone	:				
How did y	ou hear about this	s volunteer opp	ortunity at UBC	?					
Are vou c	urrently a student	at UBC?	YES - NO -						
	ase indicate your p								
11 TE3, pie	ase mulcate your p	nogram and ye	al of study						
Are you a	UBC Alumnus?		YES   NO						
-	ase indicate progra	am and vear of							
11 123, pic	ase maleate progra	ann and year or	61444411011						
Are you c	urrently employed	? YES □	NO □						
-	ase indicate where			started, and th	e role in w	hich vou are empl	oved		
Are you c	urrently volunteeri	ing with or have	you volunteere	ed in the past?	YES	□ NO □			
IF YES, ple	ease indicate the vo	olunteer assigni	ment(s)						
Are vou 1	9 or older? YES 🗆	NO □	IE NO	, please indica	to date of h	irth			
Ale you i	9 of older: TE3	NO 🗆	ii NO,	, piease indica	ie date of b				
			Availa	hility					
Which ho	urs are you availab	le for voluntee			ropriate bo	xes.			
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday		
Morning									
Afternoo Evening			1						
LVEIIIIR		1	1	1	1	I	1		



	Emergency Contact						
Name:  Last  Home Phone:		 First	Relationship: Cell Phone:				
		Work Phone:					
		References					
Name:	Last	First	Relationship:				
Company	:		Phone:				
Address:			Email:				
Name:	Last	First	Relationship:				
Company	:		Phone:				
			Email:				
Name:		First	Relationship:				
Company	:		Phone:				
Address:			Email:				

Applicant Name: \_\_\_\_\_



## **Respectful Environment Declaration**

I understand that the University of British Columbia endeavours to foster a harmonious climate in which volunteers, students, faculty and staff are provided with the best possible conditions for learning, researching, and working, including an environment that is dedicated to excellence, equity and mutual respect. The University of British Columbia strives to realize this vision by establishing opportunities and practices that respect the dignity of individuals and make it possible for everyone to live, work and study in a positive and supportive environment as possible.

As a Volunteer it is expected that I will abide by the above and show respect for all people and their differences, demonstrate fairness and equity, try to understand the perspectives of others, promote cooperation and collaboration, endeavour to bring out the best in others, demonstrate empathy; and use respectful language at all times.

**Declaration** By submitting this application, I declare and affirm that the facts set forth in it are true and complete. I authorize UBC to verify any information that may be relevant to both my service and suitability as a UBC Volunteer. I understand that if I am accepted as a UBC Volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal from any volunteer assignment.

Signature:	Date:							
	Agreement and Acknowledgement of Services							
l,	agree to abide by the policies, standards, and procedures of the University of							
British Columbia and the respective	e Department.							
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<u> </u>	I acknowledge that I am voluntarily donating my services to the University of British Columbia. I understand and agree that I am a volunteer and am not an employee of the University of British Columbia in respect of all volunteer							
_	and agree that I am not entitled to, and have no expectation of, any compensation,							
=	s. I acknowledge and agree that my volunteer services do not constitute a							
guarantee or promise of future en	ployment, not do they entitle me to greater consideration for any future							
	nities. I further acknowledge and agree that my volunteer service and any rights or							
privileges associated therewith ma	y be terminated at any time by the University without cause or notice.							
Name (Print):								
Signature:	Date:							
Parental Consent: for applications under the age of 19 years								
Parent/Guardian Name (Print):								
- areng Gaaraian Hame (Fillit).								
Signature:	Date:							
<u> </u>								



## **UBC Volunteer Confidentiality Agreement**

I, \_\_\_\_\_\_, acknowledge and understand that, during the course of my work as a UBC Volunteer, I may acquire access or use of certain sensitive or confidential information ("Confidential Information"). I acknowledge and agree that any such confidential or proprietary information, including, but not limited to, medical or personal information, trade secrets, patents, confidential research and development data, or any other sensitive information, shall be kept confidential. In consideration for this volunteer opportunity, the receipt and sufficiency of which is hereby acknowledged, I further agree to the following:

- I. The term Confidential Information includes information not generally known to third parties and which is proprietary to the University of British Columbia ("UBC") or its affiliates, including information about UBC's various projects and departments. All information that becomes accessible or disclosed to me during the course of this volunteer appointment shall be deemed Confidential Information.
- II. I understand that unauthorized disclosure or use, whether intentional or unintentional, of any Confidential Information would be detrimental to UBC. I acknowledge and agree:
  - 1. not to disclose to any third party the object and scope of any sensitive discussions that I may be privy to, except as required by law or as may be necessary to enforce the terms hereof;
  - 2. not to use any of the confidential information for any purpose other than for or in connection with the authorized purpose;
  - 3. to maintain all of the confidential information in confidence and not to disclose any portion of the confidential information to any person or entity not authorized hereunder without the prior written consent of UBC;
  - 4. that any dissemination of confidential information shall be only in connection with the authorized purpose, and shall be only to UBC employees, agents or affiliates who have a need to know such confidential information as it relates to the authorized purpose; and
  - 5. that upon termination of the volunteer relationship, all records, compositions, articles, documents and other items which contain, disclose and/or embody any Confidential Information shall be returned to UBC or destroyed by myself, and I will certify to UBC that I am in full compliance with these provisions.
- III. The obligations pursuant to Section B above shall not apply to information which:
  - 1. is or becomes a part of the public domain through no act or omission of my own;
  - 2. can be shown to be already possessed by myself as of the date of disclosure;
  - 3. shall be made available to myself on a non-confidential basis by a third party having a right to do so;
  - 4. is disclosed by order of a court of competent jurisdiction; or
  - 5. UBC authorizes the release of such information in writing.
- IV. The termination of the relationship between myself and UBC shall not relieve me of my obligations of confidentiality and non-disclosure herein or the obligation to return or destroy certain materials



## Declaration

I have carefully read the foregoing UBC Volunteer Confidentiality Form and declare I fully understand its contents and my obligations. If the Applicant is not of age of majority, I, as a parent or legal guardian of the Applicant have fully read the foregoing UBC Volunteer Confidentiality Form and fully understand my obligations assumed on behalf of the Applicant.

Applicant Name (Print):		
Signature:	Date:	
Parental Consent: Required for Applicants under the age of 19 years		
Parent/Guardian Name (Print):		
Signature:	Date:	