



Volunteer Application

I wish to contribute the voluntary services indicated below as an expression of my desire to assist St. Johns River State College in the manner indicated. I understand that there is to be no compensation or tangible benefit to me for the rendering of the services indicated; and, I agree to hold the College harmless from any liabilities related to the voluntary services I am rendering. I also agree to undergo fingerprinting and a background check.

Voluntary service dates: _____ through _____

Description of services:

Volunteer Name (please print) _____ Date _____

Volunteer Signature _____ Date _____

Recommended: _____
Dean _____ Date _____

Reviewed: _____
VP for Administrative Affairs _____ Date _____

Approved
 Disapproved

President _____ Date _____