RSVP

Lead With Experience

Sponsored by Black Hills State University

1200 University St., Unit 9089 Spearfish, SD 57799-9089
Phone: 605-642-5198 or 877-293-0039 Fax: 605-642-7668
Email: rsvp@bhsu.edu

VOLUNTEER INFORMATION/ENROLLMENT FORM

(Complete a Separate Sheet for Each Volunteer)

Name: _____ Birth Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell Phone _____

E-mail: _____Soc Sec #: _____

PREFERRED VOLUNTEER ASSIGNMENTS/ INTERESTS: _____

_____

EMPLOYMENT/VOLUNTEER EXPERIENCE: _____

_____

SPECIAL SKILLS: _____

PHYSICAL/MEDICAL LIMITATONS: _____

Emergency Contact: _____Phone:_____

Beneficiary for RSVP Supplemental Accident Insurance:

Name and Relationship_____Phone_____

Address_____

Department: Higher Education **Division/Office:** Black Hills State University

Work Site/Location: Retired and Senior Volunteer Program
Position: Volunteer
Dates of Service: Start: _____ (today's date) End: at such time as I no longer volunteer for RSVP under the auspices of Black Hills State University

Approx. Hours/Week: 1-30. **Supervisor's Name and Title:** Nancy Wietgrefe, Director
Supervisor's Phone Number: (605) 642-5198

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SOUTH DAKOTA
VOLUNTEER WORK AGREEMENT

I, _____, agree to perform the duties and responsibilities of the volunteer position mutually agreed to by myself and the South Dakota Department of Higher Education – RSVP.

I understand that my services are voluntary, that I will not be compensated, and that volunteer workers are provided worker's compensation coverage. I also understand that I will be covered by the same terms and conditions applicable to state employees according to the liability coverage program for public entities while performing volunteer activities.

I also understand that, if I use my personal automobile to and from my volunteer work station, I will arrange to keep in effect automobile insurance equal to or greater than the minimum required by the state.

This agreement may be canceled at any time by notification of either party.

I have read the above agreement and understand it and agree to serve as a volunteer from_____ (start date) through such time as I no longer volunteer for RSVP under the auspices of Black Hills State University.

_____ _____
Volunteer Signature Date

_____ _____
RSVP Supervisor Signature Date