

South Dakota State University

Volunteer Work Agreement

This form is to be used in conjunction with University Policy 4:8 Volunteers

Submit completed form to the Human Resources
Office Morrill Hall 100, Box 2201, SDSU,
Brookings, SD 57007
Or by Fax to (605) 688-5822

I, _____, agree to perform the duties and responsibilities of the volunteer position mutually agreed to by myself and the department stated above.

I understand that my services are voluntary and that I will not be compensated. I further understand that volunteer workers are provided worker's compensation coverage, and 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 understand that I am subject to all University and South Dakota Board of Regents policies, including University Policy 4:8 Volunteers, and those regarding safety and security, non-discrimination, sexual harassment, drug and alcohol use, etc. I understand it is my responsibility to familiarize myself with the University policies, which can be found at <http://www.sdstate.edu/policies/>, as well as any policies applicable to the department through which I am volunteering, such as policies regarding confidentiality of records, intellectual property, etc.

I understand that an individual holding a temporary visa may not serve as a volunteer in a position where others receive compensation or perform the same services. An individual with a pending H-1B visa application to work at the University cannot serve as a volunteer. I understand that volunteer status may not be used as a way to avoid or defer compliance with the employment eligibility requirements of federal immigration laws.

I agree to assign, and I do hereby assign, to the South Dakota Board of Regents all my right, title, and interest, whether present or expectant, in intellectual property that I may create, author, invent, or reduce to practice pursuant to my services as a volunteer. I understand that South Dakota Board of Regents Policy 4:34 not only establishes the obligations to assign and to disclose intellectual properties, but also reserves certain rights to creators of intellectual property and defines conditions under which the Board of Regent's rights of ownership may be waived in whole or in part.

I understand this coverage is only provided upon completion and submission of this document to the Human Resources Office. I also understand, depending on the duties for which I will be volunteering, that I may be subject to a background check.

I understand that I am under no obligation to provide any services to the University and am free to discontinue my volunteer activities at any time. I further understand that the University may terminate any volunteer relationship at any time without cause or prior notice and at its sole discretion.

I have read this agreement, understand it, and I agree to serve as a volunteer under the terms and conditions outlined herein.

Volunteer Signature _____ Date: _____

Description of services provided by volunteer (Reason for appointment): _____

Department Animal Science Department Signature: Kristi Underwood

Department Contact Phone: 688-5439 Dates of service: Start: 10/1/2019 End: 4/1/2020