

Tel Aviv University – University Regulations

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Name of Regulation: ENGAGING VOLUNTEERS

Appendix B: **Volunteering Form** (based on Item 4.2)
(January 21, 1999)

To: Unit Director (unit in which the volunteer will serve)

Name of volunteer _____ ID _____ Address _____

I the undersigned offer my services as a **volunteer**, in the capacity of _____
Starting on _____ at the scope of _____ hours per week.

I agree to the following conditions: I will not receive any recompense for my work as a volunteer and will not be insured through National Insurance or any other kind of insurance (excluding 3rd party insurance – if applicable – in case of negligence on the part of the university); I assume full responsibility for everything associated with and included in my activities as a volunteer at TAU.

I also undertake to maintain secrecy regarding any information brought to my knowledge through my activities as a volunteer, and not to reveal such information to any person except those legally entitled to be informed.

Date _____ Signature _____

To: Head of Faculty Administration/Academic Secretariat

I recommend the services of the volunteer whose personal info is detailed above for the following reasons:

Date _____ Name of Unit Director _____ Signature _____
