



Human Resources
 P.O. Box 929, Yuma, Arizona 85366-0929
 Phone: 928-344-7504 or 1-888-293-0392 TTY: 928-726-0329
 FAX: 928-317-6001
www.azwestern.edu

VOLUNTEER APPLICATION

Arizona Western College is an equal opportunity employer. AWC does not discriminate on the basis of race, color, religion, national origin, sex, age 40 or over, disability, genetic information or any other status protected by law or regulation. It is our intention that all qualified applicants are given equal opportunity and that selection decision be based on job-related factors.

Last Name: _____ **First Name:** _____ **Middle:** _____

Mailing Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Home Telephone: _____ **Work Telephone:** _____

Alternate Telephone: _____ **Valid E-mail:** _____

Position for Which You are Volunteering: _____

Department: _____ **Supervisor:** _____

Does this position interact directly with students? Yes No

Description of Volunteer Duties: _____

Availability:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
To							

Current Employer: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Job Title: _____ **Work Telephone:** _____

Supervisor's Name: _____ **Employment Dates:** _____ to _____

Arizona Western College has an age requirement for most campus areas. Please mark the box that applies to you.

14 - 15 years old
 16 - 17 years old
 18 years or older

HR Clearance: _____
 (Date)

Date: _____

VOLUNTEER
RELEASE AND HOLD HARMLESS AGREEMENT

I, _____, hereby accept the duties and responsibilities associated
(Print Name)
with the position of _____. I understand that I will be held
(Volunteer Position Title)
accountable for my acts, responsibilities, duties and my services will be on a volunteer basis without
monetary compensation, fringe benefits or special remuneration of any kind from Arizona Western
College.

In consideration of being permitted to serve as a volunteer, I, for myself and my spouse,
representatives, heirs and assigns, do hereby release and discharge Arizona Western College, and its
employees and agents, from any and all loss or damage, and any and all claims of damage resulting
therefore, on account of injury to person or property, including any injury arising from the performance of
my responsibilities and duties.

I attest and verify that I have full knowledge of the risks involved in performing my responsibilities
and duties as a volunteer.

I agree to indemnify, defend and hold harmless Arizona Western College, and its employees and
agents, from any loss, liability, damage or cost they may incur due to the performance or non-
performance of my duties as a volunteer, whether caused by my negligence, intentional act, inaction or
otherwise.

This Release and Hold Harmless Agreement is intended to be as broad and inclusive as
permitted by the laws of the State of Arizona, and that if any portion hereof is held invalid, it is agreed that
the balance shall, notwithstanding, continue in full legal force and effect.

I have read the above, and I understand and agree to its contents.

Hours per week _____.

Inclusive dates of volunteering _____ to _____.

Volunteer Signature Date

Parent's Signature Date
(Required: If Volunteer is a Minor)

Supervisor Signature Date

Chief Human Resources Officer Signature Date

NOTE: Please send to Human Resources