

# Volunteer\* Appointment Form

*Form # 13*

*1/09 YELLOW ORIGINAL*

Volunteer: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Department: \_\_\_\_\_

(Include a brief statement of responsibilities)

Responsibilities: \_\_\_\_\_

Imm. Supervisor: \_\_\_\_\_

Visiting Scholar (includes faculty exchanges, COIL instructors)

Retired Senior Volunteer Program

Affiliation (check one):

Youth Employment Program

Non-SUNY Cortland Student Intern \_\_\_\_\_ (College name)

Other \_\_\_\_\_ (describe)

Appointment Dates: \_\_\_\_\_ To \_\_\_\_\_

\_\_\_\_\_  
(Signature – Department Head)

\_\_\_\_\_  
(Date)

**FORWARD TO HUMAN RESOURCES OFFICE**

*Human Resources Verification*

By: \_\_\_\_\_ Date: \_\_\_\_\_

\*Volunteers include any individuals who are providing services to SUNY Cortland and are not being paid by SUNY Cortland (or one of its affiliates such as the Research Foundation of SUNY). They are eligible to receive a C#, a SUNY Cortland ID card, and a parking permit. Volunteers are covered by workers' compensation and the Public Officers Law and should receive training as required in FERPA, HIPAA, and/or any other confidentiality requirements applicable to the particular department for whom they are working.