

VOLUNTEER/UNPAID VISITING SCHOLAR FORM

Please note: "Section 3(e)(4)(A)(ii) of the FLSA does not permit an individual to perform hours of volunteer service for a public agency when such hours involve the same type of services which the individual is employed to perform for the same public agency." Reference: Department of Labor's Regulations 29 C.F.R. §553.102

Are you a current SJSU employee (faculty, staff, student, etc.)? Yes No

If yes, please provide title and department: _____

EmplID: _____ Date of last appointment: _____

Personal & Contact Data	
Legal Name	
Are you under age 18?	Yes ____ No ____
If yes, please provide your date of birth.	Date of Birth (if under age 18): _____
Street Address	
City, State, Zip	
Phone Number	
E-mail	

Education	
Highest Degree Attained	(if not listed, User can enter)
Institution/City/State	
Date Conferred	

Emergency Contact Data	
Name	
Phone Number	
Relationship	

Department Information	
Department/School	
Dates of Appointment	
Supervisor	
Phone Number	

Volunteer Position (check all that apply)			
<input type="checkbox"/>	Athletics (Coach, Trainer)	<input type="checkbox"/>	Advisor (Tutor, Mentor, Student Supervisor)
<input type="checkbox"/>	Counselor	<input type="checkbox"/>	Lecturer (Instructor)
<input type="checkbox"/>	Librarian	<input type="checkbox"/>	Presenter (Seminars, Speeches, Guest Speaker)
<input type="checkbox"/>	Researcher (Collaborator, Co-PI)	<input type="checkbox"/>	Other:

Please provide a description of the volunteer duties.

You will be required to furnish proof that you are legally authorized to work in the United States.

Can you furnish such proof? Yes No

During the period of your volunteer appointment, are there any restrictions on your ability and/or availability to perform the essential functions of your job at SJSU with or without reasonable accommodations? Yes No

CRIMINAL HISTORY

Have you ever been convicted of a felony? Yes No

Have you within the past five years been convicted of a misdemeanor that resulted in incarceration? Yes No

Have you been arrested for any criminal offense for which you are out on bail, or on your own recognizance, pending trial? Yes No

Please list all convictions for a felony, or misdemeanor within the last five years. A conviction will not necessarily disqualify you as an applicant for appointment. Each case is considered on its individual merits.

Date of Conviction	Felony or Misdemeanor	Location of Conviction (City & State)	Describe Nature of Offense

I certify that the answers I have given in the application for this position are true and correct and that I have not knowingly withheld any facts or circumstances. I understand that all answers given in my application for appointment are subject to verification and that should I be employed at the campus, any misrepresentation or omission of facts in this application may be sufficient reason for dismissal.

This is to acknowledge that I desire to volunteer my services, performing duties listed above and that services rendered by me will be at the direction of the above named supervisor. I will not be compensated for these services. I understand that I must not perform hours of volunteer service for SJSU when such hours involve the same type of services which I am employed to perform for SJSU. Further, I understand that I serve at the pleasure of my supervisor and/or appropriate administrator.

This appointment is governed by the appropriate rules of the University and by the rules and regulations of the Trustees of the California State University. If I am volunteering to teach, I understand that volunteer teaching appointments are contingent upon satisfactory enrollments in the department/school of assignment. Should it become necessary to cancel course sections because of insufficient enrollment therein, or to shift all or part of your assignment to a regular probationary or tenured faculty member, the University reserves the right to cancel or modify its offer of appointment. This form will be placed in your Personnel Action File five (5) days after approval from Faculty Affairs.

Signature of Volunteer/Unpaid Visiting Scholar Date

My signature indicates my recommendation for approval of volunteer to perform duties as stated.

Signature of Supervisor in Volunteer's Unit Date

Signature of Home Department Chair/School Director (if different from above) Date

Signature of Dean of Home College Date

Faculty Affairs Approval Signature Date

Keep copies at each level, and forward the signed original to Faculty Affairs, ADM 146, Ext. Zip 0021.