

TEXAS LUTHERAN UNIVERSITY

Student Organizations

Volunteer Worker Position
Description

Volunteer Name: _____ SS# _____

Address: _____

City: _____ State: _____ Zip: _____

Working Title: _____

Name of Student Organization: _____

Start Date: _____ End Date: _____

Work Schedule: _____

Description of Duties:

Special Skills or Licenses Required:

I have read this position description and understand that my volunteer service at Texas Lutheran University is without pay or benefits. TLU retains the right to control the volunteer job function, how and when it is performed, and the duties of the work.

Volunteer Worker's Signature

Date

Supervisor's Signature

Date

Director of Student Activities Signature

Date

Cc: Human Resources
Department Copy