



Your completed form will be held securely and confidentially. Only authorised staff will have access to your information.

Policies and Procedures

I,
First name Family name

have received, read and agree to comply with [INSERT NAME OF ORGANISATION HERE]'s Policies and Procedures in relation to:

Code of Conduct Confidentiality Grievance Policy Work Health and Safety
Signed Date

Volunteer placement details:

Position Title

Manager's name

Location of Volunteer position within the organisation:

Attendance: (frequency and times)

Declaration

I agree to carry out the tasks specified for the voluntary position to the best of my ability and to abide by the requirements of [INSERT NAME OF ORGANISATION HERE] as set out in its policies and procedures.

I understand that either party may terminate this arrangement.

Signed

Date
Day Month Year

Office use only

Finish Date / /

Volunteer Manager Notified date / /

Reason for Leaving Position
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