

Have you previously worked for the City of Bryan? YES NO

If yes, provide dates of employment: From: ____/____ TO ____/____

Department: _____ Position: _____

Reason for leaving: _____

Are you related to any City of Bryan employee and/or Bryan City Councilmember?

YES NO If yes, please provide name and department/position:

Have you ever been convicted of, or have charges pending for, a felony or misdemeanor, other than a minor traffic violation? (**NOTE: This includes offenses for which probation or deferred adjudication was granted.**)

YES NO

If yes, please provide the following information: (NOTE: If more space is needed, provide on back or attach an additional sheet.)

Date	Nature of Offense	Name of Court	Disposition of Case

IMPORTANT!! A conviction record will not necessarily bar you from volunteer work. Factors such as nature of offense, date, and relationship between the offense and the volunteer work will be considered. However, a false statement or omission of any information will bar you from volunteer work with the City of Bryan.

Do you have any physical or mental impairments that might limit you from performing the essential functions of the position? YES NO

If yes, please describe the limitations: _____

Days available for volunteer work:

Monday _____ to _____

Friday _____ to _____

Tuesday _____ to _____

Saturday _____ to _____

Wednesday _____ to _____

Sunday _____ to _____

Thursday _____ to _____

When can you begin? _____

Do you have a certain number of hours that you need to complete? YES NO
If yes, how many? _____

Do you have a deadline to complete this work? YES NO
If yes, when? _____

The statements made by me in this application are true and complete to the best of my knowledge, and I understand it is subject to verification by the City of Bryan. I understand that any false information, omissions of facts or misrepresentations may disqualify me from volunteer work with the City of Bryan or immediate release from volunteer work.

I understand that a criminal history check will be administered as well as verification of any information provided as part of the volunteer process, such as reference checks, review of drivers license record, etc.

I understand that I may be required to submit to and successfully pass a medical examination and/or drug test by a physician and laboratory selected by and at the expense of the City of Bryan.

In the event that I am placed as a volunteer with the City of Bryan, I understand that I shall be required to sign a Volunteer Agreement and that I will be required to comply with all of the City's rules, policies and regulations. I fully understand that if my services are no longer needed, or my performance is not acceptable, for any reason, the City of Bryan has the right to terminate my services as volunteer at any time, with or without notice.

Signature: _____ Date _____

HUMAN RESOURCES USE ONLY		
Date & Time:	Drug Screen: PASS / FAIL	Criminal Check: PASS / FAIL
Date Cleared:	Comments:	



VOLUNTEER AGREEMENT

I desire to volunteer with the City of Bryan (hereinafter "City"). In consideration of the City's agreeing to allow me to volunteer, the sufficiency of which consideration is hereby acknowledged, and understanding that the City must maintain certain operational standards.

- ❖ I hereby affirmatively state that I understand that I shall receive no compensation whatsoever for performing work for and on behalf of the City. All activities observed, undertaken or performed by me shall be performed without promise, expectation or receipt of compensation for services rendered and without expectation, promise, or representation, expressed or implied, of employment with the City of Bryan.
- ❖ I understand that a criminal history check will be administered as well as verification of any information provided as part of the volunteer process, such as reference checks, review of drivers license record, etc.
- ❖ I understand that I will be required to submit to and successfully pass a medical examination and/or drug test by a physician and laboratory selected by and at the expense of the City of Bryan.
- ❖ I agree to abide by all regulations and policies as established by the City.
- ❖ I agree that I shall not operate City vehicles or equipment unless I am required to as part of my volunteer duties. If, in the course of my volunteer service, I use or am required to use a City vehicle, I understand and agree that I shall have and maintain a valid Texas driver's license, meet the City's established driving record criteria and have completed the City's driving training requirements.
- ❖ I understand that during my service for and on behalf of the City that I may be privy to confidential and sensitive information. I understand and agree that privileged and confidential information shall not be repeated, disseminated or disclosed by me in any manner and that if I breach the confidentiality of the City, my services as a volunteer will be terminated, and that I may be subject to civil and/or criminal sanctions.
- ❖ I fully understand that Worker's Compensation insurance does not insure me and hereby waive all claims or causes of action for physical injury or illness that may accrue by virtue of my service to and for the City of Bryan.
- ❖ ***I fully understand that if my services are no longer needed, my performance is not acceptable, or for any reason, the City of Bryan has the right to terminate my services at any time, with or without notice.***
- ❖ ***I acknowledge that if I am injured or killed while performing volunteer duties or while operating a motor vehicle or equipment while performing volunteer duties for and or on behalf of the City, that my estate, my heirs, assigns, personal representatives, or I shall***

_____ (Initial)

have no claim against the City and that I shall indemnify and hold harmless the City from and against any and all claims, demands, lawsuits, losses and expenses, including court costs and attorneys fees incurred as a result of my volunteer activities.

- ❖ I further understand and agree that by signing below I am indemnifying and holding harmless the City against any and all claims, demand, and/or liability of any kind or nature that may be brought against the City by any party stemming from alleged wrongful acts or failures to act in my provision of volunteer services.

All of the foregoing statements, representations and waivers are freely and voluntarily made.

Full Name (Printed): _____

Signature: _____

Date: ____/____/____

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STATE OF TEXAS
COUNTY OF BRAZOS

BEFORE ME, the undersigned authority, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, this ____ day of _____, 20__.

Notary Public, State of Texas

WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

CITY OF BRYAN VOLUNTEER PROGRAM

1. In consideration for being selected to serve as a Volunteer for the City of Bryan under its Volunteer Program, I hereby **RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE** the City of Bryan, Texas, their officers, servants, agents or employees, (hereinafter referred to as CITY) from any and all liability, claims, demands, actions, and causes whatsoever arising out of or related to any loss, damage or injury, including death, that may be sustained by me or to any property belonging to me, or otherwise, while participating in such activity, or while in, on or upon the premises where the activity is being conducted.

2. I am fully aware of the risks and hazards connected with the activity, and I hereby elect to voluntarily participate in said activity, and to engage in such activity knowing that the activity may be hazardous to me and my property. **I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISK OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY, INCLUDING DEATH**, that may be sustained by me, as a result of being engaged in such activity.

3. I further hereby **AGREE TO INDEMNIFY AND HOLD HARMLESS** the CITY from any loss, liability, damage or costs, including court cost and attorney's fees that the CITY may incur due to my participation in said activity.

4. It is my express intent that this Waiver of Liability and Hold Harmless Agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representatives, if I am deceased or incapacitated, and shall be deemed as a **RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE** the CITY. I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the laws of the State of Texas.

IN SIGNING THIS WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Waiver of Liability and Hold Harmless Agreement, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements or inducements, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this Agreement for full, adequate and complete consideration fully intending to be bound by the same.

IN WITNESS WHEREOF, I have hereunto set my hand on this ____ day of _____, 20____.

VOLUNTEER:

WITNESS:
