

## JUNIOR VOLUNTEER AGREEMENT

Holding a volunteer position is a serious commitment to specific duties and schedules. We depend on you to meet these responsibilities. Attendance, maturity, confidentiality, and other factors are requisite for a quality program and quality experience for you.

If accepted as a teen hospital volunteer, I agree that:

1. I will be friendly, courteous and considerate of others; punctual, conscientious and professional in demeanor. I will take pride in volunteering, at all times upholding the philosophy and standards of the hospital, its guest relations guidelines and its policies.
2. I will wear my nametag at all times when on duty and sign in upon arrival for duty and sign out immediately before leaving for security reasons. Lost or damaged badges may be replaced at a cost of \$5.00.
3. I will not sell or attempt to sell food or services for fund-raising purposes (other than the Auxiliary), request contributions, or solicit persons to sign or distribute political petitions on hospital premises.
4. I will make a commitment of six (6) weeks to the program. **I understand absence of more than 2 days during the program will result in loss of all volunteer hours earned. ABSENCES CANNOT BE MADE UP. I will give sufficient notice of any absence** by calling the Volunteer Office before my shift at **940-539-6199**.
5. I will have good hygiene: cleanliness is absolutely necessary (hair properly groomed, males clean-shaven, neat and clean clothing). I will not wear scented products.
6. I will dress according to dress code and will wear no exceptions to dress code: no blue jeans, shorts, tank tops, tube tops, t-shirts, slide-on shoes. Dress code is as follows:  
**Navy polo shirt, khaki pants, (provided by the volunteer) black or white shoes, socks, and name tag.**
7. I will notify the Volunteer Office of any name, phone or address changes I may have, in a timely manner.
8. I understand that MCDC may terminate my status as a volunteer at any time and for any reason, including but not limited to (a) failure to comply with MCDC policies, rules and regulations; (b) absences without prior notification or other attendance problems; (c) unsatisfactory attitude, work, dress or appearance; and (d) any other circumstances, which, in the sole judgment of the hospital staff, would make my continued services as a volunteer unnecessary or contrary to the best interests of the hospital. I agree cell phones will not be used while working as a volunteer.

This agreement is between \_\_\_\_\_ and Medical City Decatur Auxiliary Junior Volunteer Program.

Signed on \_\_\_\_\_, in the year \_\_\_\_\_