

Volunteer:

Name: ______Signature: _____Signature: ____Signature: ____Signature: ____Signature: ____Signature: ____Signature: _____Signature: ____Signature: ____Signature: _____Signature: ____Signature:

Proposed Extended Dates of Volunteer Service

New Start Date: ______New End Date*: ______

*Volunteer Extension/Renewal Request Form must be submitted for service extending past August 6th.

Supervisor Approval:

I confirm that the duties the volunteer will be performing will not change from those previously approved by Central Human Resources. If the duties of the volunteer have changed, I understand that I must submit new Volunteer Service paperwork, including the Volunteer Service Application and Volunteer Appointment Form with detailed duties for review and approval.

I certify the volunteer service will not displace a paid position.

I certify that the volunteer is not otherwise employed by USF to perform the same types of duties.

Name:	Signature:	Date:
-------	------------	-------

*Please return to Central Human Resources, SVC 2172 or Email volunteerservice@usf.edu. Questions 813-974-2970

Approved Extended Dates of Volunteer Service:

New Start Date:	New End Date:	
Name:	Email:	

Signature: _____