

Volunteer* Appointment Form

Form # 13

8/21 YELLOW ORIGINAL

Volunteer: _____ **Cortland Alum?** ☐ Yes ☐ No
If Yes HR will send cc: to Alumni Engagement

SSN# (or C# if assigned): _____ DOB: _____

Department: _____
(Include a brief statement of purpose/responsibilities)

Purpose/Responsibilities: _____

Notes: _____

Affiliation (check one):
☐ Visiting Scholar (includes faculty exchanges, COIL instructors)
☐ Contributing Service Instructor (includes unpaid collaborating faculty, ROTC instructors, and similar)
☐ Retired Senior Volunteer Program
☐ Non-SUNY Cortland Student Intern _____ (College name)
☐ Other _____ (describe)

Appointment Dates: _____ To _____

(Signature – Department Head)

(Date)

FORWARD TO HUMAN RESOURCES OFFICE

Human Resources Verification

By: _____ Date: _____

***Volunteers include any individuals who are providing services to SUNY Cortland and are not being paid by SUNY Cortland (or one of its affiliates such as the Research Foundation of SUNY). They are eligible to receive a C#, a SUNY Cortland ID card, and a parking permit. Volunteers are covered by workers' compensation and the Public Officers Law and should receive training as required in FERPA, HIPAA, and/or any other confidentiality requirements applicable to the particular department for whom they are working. All individuals appointed through this mechanism are responsible for complying with all campus policies and procedures.**