## Bechtel Center Alumni Volunteer Agreement and Release

Name of Volunteer:	
Date of Volunteer Services: From To To To	
Date of Volunteer Services: From To (Date)  I have chosen to volunteer my services to Purdue University ("Purdue") in the "Bechtel Innovation Design Center" to perform the following services "Alumni Mentor bringing industrial experience to Center students", refer to the latest version of the Alumni policy online <a href="https://www.purdue.edu/bidc/about/policies/bechtel-mentor-alumni-policy/">https://www.purdue.edu/bidc/about/policies/bechtel-mentor-alumni-policy/</a> TERMS OF AGREEMENT and RELEASE	
	ning an environment that recognizes the inherent worth and dignity of every
person. Harassment at Purdue is unacceptable condu 2. I understand and consent to Purdue conducting a Se	uct and will not be tolerated(Initials) ex and Violent Offender Registry Check, and motor vehicle records check if
applicable, per the University's policies and practice	
<ol><li>I acknowledge and agree that I will not be considered and hour laws, and that my voluntary participation i</li></ol>	ed an employee of Purdue University for purposes of state and federal wage is without promise, expectation or receipt of compensation.
4. I understand that Purdue does not provide me with accident or medical insurance and is not responsible for any accident or medical expense incurred by me. Further, I understand that I am neither covered by Workers' Compensation nor entitled to employee benefits as a result of my voluntary affiliation.	
5. I agree to abide by the University's policies and pra	
6. I understand to not disclose or discuss any confiden	tial information obtained from the University, either during or after my
	ase or discipline me as a volunteer at its sole discretion and without prior agreement are valid for the duration of my volunteer status as so determined
	due as it deems necessary and, if so modified, I will be provided with notice
Purdue University, The Board of Trustees of The Trofficers, and its trustees, agents, attorneys, affiliates	ives, do hereby release, waive, indemnify and hold harmless The Trustees of rustees of Purdue University, Purdue University, and its past and present s, related foundations, principals, insurers, subsidiaries, predecessors, l Parties") from any and all liability, damage or claim of any nature for the related to my volunteer activities.
<ol><li>I acknowledge and accept that any activity I engage death. I accept and assume the risk of such injuries a</li></ol>	e in has inherent risks that may result in bodily injury, property damage or and damages.
11. I am aware of the terms and conditions of this agree	operty damage resulting from transportation to or from the volunteer activity. Ement and am signing this agreement of my own free will. Further, by signing years of age or older and am able to perform the above-described volunteer in.
Please affirm your acceptance of the terms of this agreer thanks for your valuable contributions to Purdue.	ment stated above with your signature below, and please accept our sincere
Volunteer Signature	Print Volunteer Name and Date
Department (Witness) Signature	Print Department (Witness) Name and Date