Herpetarium, LSC112 Volunteer Information Form

Name:	Email:
ID#	
Address (home):	
Telephone: (cell):	
Birth date:	
Start of volunteering:	
(person & phone #)	
Allergies: (specifically to animals o	r materials in the Herpetarium, also major allergies, e.g., peanuts)
Other conditions which may require	e on-site treatment (e.g., asthma, epilepsy, etc.)
Date of last tetanus shot/booster: _	bood for 5 years when working with animals)
	Ill of the information provided is complete to the best of my nergency, my signature authorizes the Director of the Herpetarium to If.

Signature

Date

Revised 10-15-13

Date: _____

Herpetarium Volunteer Agreement

I ______ wish to volunteer in the BGSU Herpetarium

beginning fall/spring/summer _____, supervised by Dr. Eileen Underwood, assisted by the

student coordinators. I agree to the following stipulations:

- I will provide a schedule indicating when I am planning to work in the lab (and when I am in class or at work)
- I will notify Dr. Underwood (419-372-8564 or <u>eunderw@bgsu.edu</u>), or one of the student coordinators, if I am unable to complete my assigned duties at the time assigned, so she can find someone else to complete the duties with the animals. (Making the need known as soon as possible, but definitely in advance of the required time.)
- I agree not to come into the lab to work with animals while under the influence of any illegal drugs or alcohol, or any prescription drugs that alter my ability to work with the animals.
- I agree to refrain from handling animals that I have not been specifically trained on.
- I agree to follow the rules and regulation of the lab as described in the Volunteer Handbook, which is found on the Canvas course shell for Herp Lab Volunteers, which I will be added to following submission of the required paperwork (Volunteer information form, Herpetarium volunteer agreement, and BGSU waiver of liability form).

Signed: ______

Print:_____