

Soochow University Library Volunteer Service Legal Representative (Guardian) Consent Form

I understand that _____ intends to take on volunteer work, and hereby agree for him/her to volunteer at your library upon being hired. I understand that he/she will have to go through a suitable orientation and training programs to ensure workplace safety and performance and to ensure that he/she meets all the necessary workplace requirements, including timely and regular attendance and **compliance with library rules and regulations**. I am willing to take responsibility for any accident resulting from non-compliance with regulations. and I agree not to pursue legal action against your library or its staff.

Sincerely,

Soochow University Library

Name of legal representative/Guardian:_____ (Signature)

ID Number of Legal representative/Guardian:

Relationship:

Contact Number/Mobile number:

Date: