



VOLUNTEER DATA SHEET

Please provide the following information. Items in **Red** are required for entry into our system.

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|---|---------------------------------|-------------------------------------|
| First (Given) Name: | Last (Family) Name: | Middle Initial: |
| Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male | Birth Date: (mm/dd/yyyy) | Email Address*: |
| Telephone (must have at least one phone number): Home/Mobile: _____ Work: _____ | | |
| Have you ever been at Caltech before? Yes _____ No _____ | | |
| Are you currently enrolled in a degree program? Yes _____ No _____ | | If Yes, provide school name: |
| Local Residence - Street Address: | | |
| City: | State: | Postal Code: |

Primary Emergency Contact:

| | | | |
|--|-------------------|-------------|---|
| First Name: | Last Name: | M I: | Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male |
| Relationship: <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Sibling <input type="checkbox"/> Friend <input type="checkbox"/> Domestic Partner <input type="checkbox"/> Other | | | |
| Emergency Contact Telephone (must have at least one phone number): Home/Mobile: _____ Work: _____ | | | |

Caltech Volunteer Activity:

| | | | |
|---|--------------------------|---------------------------------------|--------------------------|
| Start Date: | End Date: | Organization Name: | Volunteer Hrs/Wk: |
| Description of Volunteer Activity: | | | |
| Campus Telephone Number: | Campus Mail Code: | Campus Bldg & Rm Number: | |
| Caltech Contact/Sponsor Name: | | Caltech Contact/Sponsor Phone: | |
| Caltech Contact/Sponsor Email: | | | |

* Will you need a Caltech ID? _____ Yes _____ No

If you answered "Yes", please be sure you have provided your email address.

If volunteer is a minor, continue to page two.

Minors volunteering in laboratories or areas with restricted access, please complete the following section:

| | |
|---|---|
| <p>Are you a minor volunteering in laboratories? Yes _____ No _____</p> <p>Minors volunteering in laboratories must be approved by the Division Chair or designee in consultation with the supervising Principal Investigator. Consideration for approval should be on a case-by-case basis taking into account potential hazards associated with the specific research, the types of equipment to be used, and any potential chemical and/or biological exposures.</p> | |
| <p>Caltech Division Chair or Designee Name:</p> | <p>Division Chair or Designee Phone:</p> |
| <p>Caltech Division Chair or Designee Email:</p> | |

| | |
|--|---|
| <p>Are you a minor volunteering in areas with restricted access? Yes _____ No _____</p> <p>Minors volunteering in areas with restricted access also must be approved by the supervising Director. Consideration for approval should be on a case-by-case basis taking into account potential hazards associated with the specific research, the types of equipment to be used, and any potential chemical and/or biological exposures.</p> | |
| <p>Caltech Supervising Director Name:</p> | <p>Supervising Director Phone:</p> |
| <p>Caltech Supervising Director Email:</p> | |

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|---|----------------------|
| <p>Minors under age 15 must be approved by Executive Director of Human Resources.</p> | |
| <p>HR Employee and Org Development Director :</p> | <p>Phone:</p> |

| | |
|---|----------------------|
| <p>Please provide a list of any individual that will working with the minor on a regular basis:</p> | |
| <p>Name</p> | <p>Phone:</p> |
| <p>Name</p> | <p>Phone:</p> |
| <p>Name</p> | <p>Phone:</p> |
| <p>Name</p> | <p>Phone:</p> |
| <p>Name</p> | <p>Phone:</p> |