

AUXILIARY AGREEMENT

Updated 1/15/20

If accepted into the Auxiliary program, I agree to:

- 1) Hold as absolutely confidential all information that I may obtain directly or indirectly concerning patients and staff and not seek to obtain confidential information from patient.
- 2) Become familiar with the organization's policies and procedures and uphold its philosophy and professional standards.
- 3) Donate my services to the organization without any monetary compensation.
- 4) Be punctual and conscientious, conduct myself with dignity, courtesy and consideration of others and perform work of the highest quality.
- 5) Furnish and maintain an appropriate uniform to project a professional appearance at all times.
- 6) Be responsible for working an agreed-upon number of hours as scheduled that are acceptable to me and to my service chair.
- 7) Attend orientation and in-service training as scheduled and required.
- 8) Carry out assignments and seek the assistance of the service chair when necessary.
- 9) When necessary take any problems, criticism and/or suggestions to my service chair.
- 10) Adhere to the sign-in procedures of the Auxiliary.
- 11) Immediately notify your service chair when unable to meet assigned shift. Find a substitute if Possible and notify chair.
- 12) Agree to a Criminal Background check.

I fully understand that the Auxiliary Board reserves the right to terminate my volunteer status as a result of the following:

- a) Failure to comply with the organization policies, rules and regulations.
- b) Continued absences without prior notification.
- c) Unsatisfactory attitude, work or appearance.
- d) Any other circumstances in which my continued service as a volunteer would be in conflict with the best interests of the organization.

I have read and agree to the above conditions:

Auxiliary members signature _____ Date _____

For Office use: To be signed at time of acceptance of a volunteer

Auxiliary representative _____ Date _____