

## **Volunteer/Intern Agreement**

I understand that during my visits to (program name) \_\_\_\_\_\_\_, performing a brief community service or internship, that it is my responsibility to ensure that I am not alone with clients. This is for my own protection, as well as to meet the state requirements. If I have any questions or concerns, I will bring them to the attention of the program's volunteer supervisor or director.

List additional agreements:

Volunteer/Intern's Signature

Program's Volunteer Supervisor's Signature

Please send a copy of this document to Brycelyn Williamson, HR Generalist 160 Gould St, Suite 300, Needham MA 02494, Email: bwilliamson@jri.org

Date

Date