

מספר הנוהל: 02-0404 בתוקף מתאריך: 17.8.2017 מהדורה: 2 תאריך עדכון אחרון: 07.03.2019 עמוד 1 מתוך 2	הטכניון - מכון טכנולוגי לישראל נהלים	
העסקת מתנדבים בטכניון		

נספח ד': טופס פרטי התנדבות – אנגלית

To: _____

Date: _____

Re: Your Voluntary Work at the Technion

We thank you for your offer to volunteer in our institution.

Please see details of your employment as follows:

Date of employment as volunteer: _____ date of completion: _____

Department: _____

Function: _____

Days and times of activity: _____


Person in charge of the department's voluntary work _____

Please see the terms and conditions of voluntary work as follows:

- There will be no compensation, financial or any other kind, nor any social benefits for your voluntary work in our institution.
- On these terms, regular employer/employee relations do not apply therefore in the event of an accident at work the volunteer is not covered by the National Insurance Institution.
- The Technion will provide a collective personal risk insurance policy, for cover in the event of death or disability of the volunteer in the event of an accident during activities in or for the Technion. Insurance cover is subject to all terms of the policy and its exceptions/irregularities.
- If you should decide to cease your voluntary work, you are requested to inform of such in advance.
- You are required to abide by Technion regulations and general safety procedures that may vary from time to time.

You are kindly requested to complete the attached personal details form

Your willingness to volunteer is greatly appreciated.

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Sincerely,

Ariel Hazan
Deputy Director General of Human Resources

I hereby consent to the contents of this letter and to all its terms.

Date: _____

Volunteer's signature: _____