



APPLICATION FOR NON-PAID OPPORTUNITY

PLEASE CHECK ONLY ONE:

Volunteer Visiting Resident Visiting Scholar/Student Post Doctoral Fellow

1. Name: _____ 2. SSN: _____ - _____ - _____

3. Address: _____ Apt #: _____

City: _____ State: _____ Zip: _____

4. Phone No.: (____) - ____ - _____ 5. E-Mail: _____

6. Date of Birth: ____ / ____ / ____* 7. Relatives Employed at MUSC? ___Y ___N
* If Age 16 or under, please attach parental permission If Yes list Name/Relationship/Dept: _____

8. Gender: ___M ___F 9. Salutation: ___ Ms. ___ Mr. ___ Dr.

10. Education (Last year of school completed):
Name of School: _____ City/State: _____

Did you graduate? ___ No ___ Yes Degree/Major: _____

11. Current/Most Recent Occupation/Employer: _____

Dates of Employment: Start ____ / ____ End ____ / ____

12. Special Skills/Talents: _____

13. Area(s) of Interest: ___ Research ___ Lab ___ Administrative ___ Data Entry

___ Supply Svcs ___ Human Resources ___ Other: _____

___ Observation Only: Dept/Area: _____

14. What are your days/hours of availability to work/observe? _____

15. What is the approximate length of time you expect to serve in this role? _____

16. Have you ever been convicted of any crime other than a traffic violation? ___ Yes ___ No If yes, please explain:

I understand that the Medical University of South Carolina reserves the right to accept or reject my application in its sole discretion and that the above statements made in this application are true and correct. I authorize the Medical University of South Carolina to conduct a criminal record search to verify my suitability for this opportunity. I understand and willingly agree to perform in the above-referenced opportunity with no compensation. I understand that should I become ill or injured while performing in this capacity, I will NOT be covered by MUSC's Worker's Compensation. I understand that it will be necessary to obtain any required medical attention from my family physician, and I release and hold MUSC harmless from any implied liability.

Signature: _____ Date: _____