Rowan University
Policy on Uncompensated Employees

I. Scope

This policy and procedure shall be followed for the engagement of individuals to perform uncompensated work for Rowan University.

II. Purpose

As an institution with increasing prestige, Rowan University is able to attract individuals with a wide range of talents and expertise who are willing to perform services for the University and its students without compensation. This policy defines the means of engaging the services of such individuals in ways that provide appropriate protections both for the University and for the individual uncompensated employee.

III Hiring Process for Uncompensated Employees

While simpler than the process of hiring compensated employees, the process for hiring an uncompensated employee requires adequate documentation. Such documentation would include:

1. An employment (volunteer) application.
2. A letter of appointment authorizing the performance of a specific act or service, with the School retaining the right to discipline or dismiss.
3. A written job description, which may be a brief outline of responsibilities included in the appointment letter.

The usual employment search requirements do not apply to the hiring of uncompensated employees.

IV. Requirements for Appointment Letters for Uncompensated Employees

Appointment letters for uncompensated employees should include the following elements:

1. A job title for the position to be filled.
2. A specification that the position is uncompensated.
3. A description of the job responsibilities of the position (which may be either stated briefly in the letter or appended to it).
4. The name of the department or office in which the work is to be performed.
5. The name of the uncompensated employee’s supervisor.
6. A statement that since the position is uncompensated, workers compensation benefits are not available (and, consequently, the employee should have private health insurance).
7. A statement that the employment is at will and can be terminated without cause.
8. A signature block for the employee’s acceptance of the terms of the appointment.

The letter should be signed by whoever ordinarily signs employment letters for part-time staff employees for the employing division, school or office.
V. **Fingerprinting**

Fingerprinting of newly-engaged uncompensated employees shall be required unless they are regularly enrolled students of the University.

VI. **Recordkeeping**

The official personnel files for uncompensated employees, including copies of their employment applications and appointment letters, shall be kept in the Office of Human Resources.

VII. **Tort Claims Act Coverage for Uncompensated Employees**

Uncompensated employees are eligible for coverage under the Tort Claims Act, which defines a covered individual as “an officer, employee, or servant, whether or not compensated or part time, who is authorized to perform any act or service,” and who is acting within the scope of his or her employment. Note that “volunteers” per se are NOT covered by the Tort Claims Act. In order for an individual to be viewed as an uncompensated employee rather than as a mere volunteer, there must be documentation as specified in Section B, above, of the individual’s formal employment by the University.
Rowan University recognizes the importance of volunteerism to American society, and it is our intention to foster the tradition of volunteerism through greater involvement on campus. Volunteers, including student volunteers, provide a valuable service to the University without compensation or other remuneration, and we thank them for their service to the University.

Section 1: Voluntary Register (To be completed by department)

Name of Volunteer: _______________________________  Department: _________________________
Address: _______________________________  Dates of Service: _________________________
Phone #: _______________________________  Emergency Contact _______________________________
Services Provided: _______________________________
   ________________________________________________
   ________________________________________________
   ________________________________________________

Section 2: Liability Waiver/Release (To be completed by volunteer)

I will be volunteering my services at Rowan University. I know that I am not an employee of Rowan and will not receive any compensation or benefits for my services. I understand that in any volunteer activity there is risk of injury, illness, damage and loss. In consideration of the opportunity to volunteer, I hereby release and forever discharge Rowan University, its trustees, officers, and employees, from any and all claims, costs, liabilities, expenses and judgments whatsoever, including attorney’s fees and court costs, arising of my performance of services. It is understood that I am not covered by the N.J. Workers Compensation Act.

This Release shall continue in effect indefinitely unless terminated or modified with the written consent of Rowan University.

Volunteer Signature _______________________________
Rowan Representative _______________________________
Division Approval _______________________________

C: Volunteer
Division
- The volunteers may not perform any services until Divisional Approval is received.

2/21/2008