

VOLUNTEER PROCEDURE			
Effective Date	November 10, 2025	Procedure Type	Administrative
Responsibility	Facilities, Maintenance and Operations	Cross-Reference	1. Hospitality and Community Stewardship Expenditures Policy 2. Vehicle Use Policy 3. NWP Health and Safety Policy 4. NWP Health and Safety Manual 5. Alberta OHS Act, Regulation and Code 6. Recruitment and Selection Policy 7. NWP Volunteer Registration Agreement and Waiver of Liability & Volunteer Sign-in Timesheet
Approver	Director – Facilities, Maintenance and Operations	Review Schedule	Annually

1. Purpose

- 1.1. To manage volunteers and their services with Northwestern Polytechnic, "NWP" or "the Institution", including the associated risks and liabilities inherent in volunteer activities.

2. Objective

- 2.1. To manage the activities of volunteers that perform or supply services on behalf of Northwestern Polytechnic.
- 2.2. To outline the roles and responsibilities of volunteers and their supervisors.
- 2.3. To outline safety processes for documenting incidents and injuries associated with NWP activities or services.

3. Scope

- 3.1. This procedure applies to all volunteers and their supervisors who are:
 - 3.1.1. Participating in an NWP-approved activity.
 - 3.1.2. Providing or supplying an NWP-approved service.
- 3.2. Volunteers are considered to be workers under Alberta OHS legislation and have the same health and safety rights and responsibilities as any other workers under OHS legislation.
- 3.3. An employee who is providing unpaid services outside of their normal employee duties and working hours are considered volunteers.
 - 3.3.1. A paid employee is not considered a volunteer and can participate in the activity with their Supervisor's approval.

- 3.4. This procedure does not apply to volunteers with the NWP Students' Association (NWPSA), including those associated with student clubs.
4. Definitions
 - 4.1. "Volunteers" refers to individuals who perform or provide services or assistance to the Institution without payment of fees, wages or salary and without any expectation of any kind of compensation.
5. Responsibilities and Guidelines
 - 5.1. The department utilizing the volunteer(s) will track the number of hours of services provided by their volunteers and the Institution will assign fair market value to those hours. The value of the services will be included in the insurable earnings information submitted to WCB.
 - 5.2. Background checks may be required for certain volunteer positions. Please refer to the Recruitment and Selection Policy for more information.
 - 5.3. All volunteer's Supervisors must:
 - 5.3.1. Review and provide access to all relevant information, policies, procedures and safety requirements applicable to the volunteer's duties. This includes providing information on any hazards relating to the activity or service being provided and any control methods applicable to those hazards.
 - 5.3.2. Explain any duties or responsibilities to the volunteers under their supervision or direction
 - 5.3.3. Ensure volunteer has received adequate training, including any required safety training.
 - 5.4. All volunteers must complete the Volunteer Registration Agreement and Waiver of Liability and agree to abide by this Volunteer Procedure.
 - 5.5. When performing or providing voluntary services, volunteers are not entering into an employment relations with NWP and are not entitled to receive a salary or compensation or benefits.
 - 5.6. NWP and the volunteer may terminate their volunteer relationship at any time without notice.
 - 5.7. There is an obligation for volunteers to respect the confidentiality of any sensitive information or dealings, which may relate to volunteering with NWP, and volunteers are not to disclose any information without the prior written authorization of NWP. This obligation of confidentiality continues into perpetuity.
 - 5.8. The volunteer is solely responsible for selecting and purchasing their own medical/health insurance. No medical/health insurance will be provided by NWP, with the exception of coverage provided by the Institutions' WCB coverage (where applicable).
 - 5.9. NWP accepts no responsibility for any costs associated with a medical/health problem nor will the Institution pay for any medical/health expenses that may be incurred by the volunteer.
 - 5.10. NWP does not provide insurance coverage for personal vehicles used by volunteers. Volunteers who will be driving their own personal vehicles to and from an event and during the event, are responsible for providing their own insurance.

- 5.11. Once a program, event, or activity has been completed, the Supervisor responsible for the program, event, or activity will forward a description of the activity and the number of hours the volunteers worked to the Director, Financial Services and Payroll Officer for inclusion in NWP's WCB insurable earnings information.
- 5.12. WCB insurable earnings information must be submitted no later than the beginning of January each year for the preceding year (e.g. January 2026 for 2025 volunteer time sheets).
- 5.13. Volunteer timesheets, waivers and other documentation is to be kept on file by the originating department for a minimum of five years. Copies can be provided to volunteers if they request them.
- 5.14. Gifts issued to volunteers should be in accordance with the Hospitality and Community Stewardship Expenditures Policy.

TO BE COMPLETED BY THE VOLUNTEER		
First Name:	Last Name:	Date of Birth (MMM-DD-YYYY):
Cell / Phone #:	Email Address:	
Address:	City, Province, Postal Code:	
Emergency Contact First and Last Name:	Phone Number:	Relationship:
TO BE COMPLETED BY THE SUPERVISOR AND REVIEWED WITH THE VOLUNTEER		
Description of Volunteer Duties (Attach Full Description as Required):		
Supervisor's Name:	Dates Available for Volunteering:	
Supervisors Contact #:	From: _____ To: _____	
Location(s) Where Duties Will be Performed:	Estimated Volunteer Hours:	
Instructions: Please read carefully. Fill in all appropriate information. By signing / initialing this form, you as a volunteer accept certain obligations and waive certain liabilities including the right to sue.		

Acceptance of Responsibilities

In consideration of my volunteer work, I understand that I am not entering into an employment relationship with NWP. Therefore, I am not entitled to receive a salary or any employee benefits. My volunteering duties and responsibilities have been explained to me in detail. I understand that I am obligated to respect the confidentiality of sensitive information or dealings, which may relate to my volunteering at NWP and agree that I will not disclose any information without prior written authorization from NWP. My obligation of confidentiality continues into perpetuity. I further understand that either NWP or I may terminate this volunteer relationship at any time without notice.

1. I will follow all rules and guidelines and abide by all hazard and risk assessments, health and safety regulations and instructions received prior to or during the above noted volunteer activities.
2. I acknowledge that I am subject to all NWP Policies and Procedures, and that I represent NWP. I therefore agree to conduct myself in a professional and safe manner while performing my volunteer activities.
3. I will report promptly to my Supervisor, the Enterprise Risk Management office or Security; incidents, injuries or illnesses that occur to myself, a child or any other person in my care. I will fill out the NWP incident reports as required.
4. To be an authorized fleet vehicle driver I will present a valid driver's licence and a 3 year driver's abstract and will follow NWP's Vehicle Use Policy.
5. When driving myself or others in my own personal vehicle to and from, or as part of an NWP activity, I acknowledge that I am responsible for my own vehicle insurance coverage and liability in case of an incident.

Volunteer Initials: _____

Assumption of Risks

In consideration of my participation in this program, I acknowledge that I am aware of and freely accept all risks, dangers and hazards that are reasonably associated with being a volunteer in this program, including the possible risk of severe or fatal injury to myself or others. These risks include but are not limited to:

1. The risks associated with traveling on public roads, while driving a NWP vehicle or private vehicle to and from a NWP event or activity.

2. General health risks such as allergic reactions to food, animals, or the environment. Volunteers with severe allergies should be prepared to manage them with their own preferred remedies, e.g. Epi-pen.
3. Injuries or sickness caused by failing to follow instructions or guidelines that were provided to you from those in charge of the activities.

Volunteer Initials: _____

According to the Alberta OHS Act, I have the following rights:

1. The Right to Refuse Dangerous Work
 - I may refuse to perform dangerous work and am protected from any form of reprisal for exercising this right.
2. The Right to Know about Workplace Hazards
 - The NWP representative in charge must tell me about the potential site hazards and give me access to basic health and safety information and preventative measures such as PPE.
3. The Right to Participate in Workplace Health and Safety
 - NWP will involve me in health and safety discussions.

Volunteer Initials: _____

Medical / Health Insurance, Other Personal Insurance and NWP Insurance

1. Please note that NWP does not provide medical / health insurance for "NWP volunteers". In the event of a medical / health problem, NWP does not accept responsibility for any costs associated with a medical / health problem and will not pay for any medical / health expenses which may be incurred by the volunteer. However, according to the Alberta Workers Compensation Act if injured in a work related accident, a volunteer can claim worker's compensation benefits.
2. While properly carrying out your volunteer responsibilities you are insured under NWP's general liability insurance policy against legal liability claims from third parties for property damages, bodily injury and personal injury as long as you have not willfully, maliciously or intentionally caused the incident.
3. NWP does not insure personal vehicles or property for employees or volunteers. Volunteers who bring personal property with them or who will be driving their own personal vehicles on NWP business are urged to contact their insurance broker to ensure that they have adequate personal automobile and property insurance.
4. I freely accept and assume all responsibility to provide myself with medical / health insurance, personal insurance and travel insurance coverage (if necessary).

Volunteer Initials: _____

Hold Harmless and Indemnity Agreement

NWP agrees to indemnify and hold harmless the volunteer for any loss, claims, damages, expenses, judgments, including reasonable attorney fees that are advanced for which NWP is legally liable. The volunteer agrees to indemnify and hold harmless NWP for any loss, claims, damages, expenses, judgements, including reasonable attorney fees, that are advanced for which the volunteer is legally liable, notwithstanding the provisions of coverage that may be available to the volunteer under NWP's liability insurance and/or the Workers Compensation Act of Alberta.

I further agree to release NWP from liability resulting from any loss, damage, injury, death, or other expense that I may suffer as a result of my participation in this program, including without limitation, negligence or breach of contract. I acknowledge this agreement is binding upon myself, my heirs, executors, administrators and representatives.

Volunteer Initials: _____

Acknowledgement

By signing this Agreement, I acknowledge that I have read, understand and comply with the contents of the Agreement.

Signed this _____ day of _____, 20 _____, at _____.

Signature of Volunteer	Signature of Witness (over 18), or Guardian (if under 18):
Print Name:	Print Name:

POPA: The personal information requested on this form is collected and protected under the authority of the Post-Secondary Learning Act (s.65) and the Protection of Privacy Act (POPA) and will only be used for the purpose of administering this activity and / or to communicate with the emergency contact in case the volunteer is injured or ill.

Questions concerning the collection, use and disposal of this information should be directed to PrivacyCoordinator@nwpolytech.ca

VOLUNTEER SIGN IN / TIMESHEET

Print Name (First and Last):					Date (MON-DD-YEAR):			
Mailing Address:		City:		Apt. #:		Province:		
Postal Code:		Home Phone:		Cell Phone:		Email Address:		
Emergency Contact (Full Name and Number):				Volunteer Student ☐	Volunteer Public Sector ☐	Volunteer Employee ☐	Volunteer Other ☐	
Name of event or activity that you are volunteering for:				Describe your duties as a volunteer:				

INSTRUCTIONS: Please write down your volunteer hours for each day. Add up hours for days worked for total hours for the week. Repeat for additional weeks. Ask your supervisor for additional timesheets as needed. Please make sure to sign and date the timesheet. Make a copy for your records. Turn in the original to the supervisor in charge. We ask that all volunteers adhere to our safety policies and procedures while on campus or off campus and engaged in institution events. For any questions, please ask your supervisor or call the Enterprise Risk Management Unit at 780-539-2925. Injuries / accidents while volunteering shall be reported to the supervisor. Fill out, sign the NWP Incident / Accident Report and any other report that may be required.

TIMESHEET								
1	Start Date(MON-DD-YEAR): _____ / _____ / _____ End Date (MON-DD-YEAR): _____ / _____ / _____							Add all days = TOTAL weekly hours
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	VOLUNTEER HOURS
	Hrs. worked	Hrs. worked	Hrs. worked	Hrs. worked	Hrs. worked	Hrs. worked	Hrs. worked	
2	Start Date(MON-DD-YEAR): _____ / _____ / _____ End Date (MON-DD-YEAR): _____ / _____ / _____							Add all days = TOTAL weekly hours
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	VOLUNTEER HOURS
	Hrs. worked	Hrs. worked	Hrs. worked	Hrs. worked	Hrs. worked	Hrs. worked	Hrs. worked	
3	Start Date(MON-DD-YEAR): _____ / _____ / _____ End Date (MON-DD-YEAR): _____ / _____ / _____							Add all days = TOTAL weekly hours
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	VOLUNTEER HOURS
	Hrs. worked	Hrs. worked	Hrs. worked	Hrs. worked	Hrs. worked	Hrs. worked	Hrs. worked	
4	Start Date(MON-DD-YEAR): _____ / _____ / _____ End Date (MON-DD-YEAR): _____ / _____ / _____							Add all days = TOTAL weekly hours
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	VOLUNTEER HOURS
	Hrs. worked	Hrs. worked	Hrs. worked	Hrs. worked	Hrs. worked	Hrs. worked	Hrs. worked	

Supervisor Signature:	Volunteer Signature:	Grand Total:
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