



**SPEECH HONOR CREW  
APPLICATION PACKET FOR UIL SPEECH STATE MEET**

**In order for your student to be considered for the 2019 Speech State Honor Crew, the following documents must be submitted at the same time for the application to be considered complete. Submit your student's application to State Speech Director Jana Riggins: [jriggins@uiltexas.org](mailto:jriggins@uiltexas.org)**

<b>Document Title</b>	<b>Where do I find it?</b>
<input type="checkbox"/> Speech Honor Crew Application for Speech State Meet	In this packet
<input type="checkbox"/> University of Texas at Austin Volunteer Application	In this packet
<input type="checkbox"/> University of Texas at Austin Volunteer Minor Consent	In this packet
<input type="checkbox"/> University of Texas at Austin Volunteer Photo Release	In this packet
<input type="checkbox"/> University of Texas at Austin Volunteer Summary of Duties	In this packet
<input type="checkbox"/> Letter of Reference to State Speech Director from Coach	Generated by coach
<input type="checkbox"/> Coach schedule at Speech State Meet	Generated by coach



**SPEECH HONOR CREW  
APPLICATION FOR UIL SPEECH STATE MEET**

Conference \_\_\_\_\_  
Region \_\_\_\_\_

*Important: No application will be accepted without school approval.*

Date \_\_\_\_\_

Full Name (Mr.) (Miss) \_\_\_\_\_  
**(Note name preference)** (first) (middle) (last)

Name of high school \_\_\_\_\_ School Phone (\_\_\_\_) \_\_\_\_\_

Address of high school \_\_\_\_\_  
(street) (city/state/zip)

Permanent Address \_\_\_\_\_  
(Street) (city/state/zip)

E-mail Address \_\_\_\_\_

Phone \_\_\_\_\_ Grade Classification: FR SOPH  
Number (\_\_\_\_) \_\_\_\_\_ (Check One) JR SR  
Age \_\_\_\_\_

What are your major interests? (Check one or more) Debate Interp Extemp

Do you have any food allergies? YES \_\_\_\_\_ NO Do you require a vegetarian meal? YES NO

List previous Speech activities and accomplishments: **(Attach sheet if necessary.)** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*\*I agree to State Meet Honor Crew Participation as per the information provided with this application. I will attend a mandatory training meeting on Sunday night prior to Speech State Meet and commit to serving for the entire tournament. Furthermore, I agree to NOT bring a cell phone into a competition room and understand that if I choose to bring one or more of these devices, I may be released from the Honor Crew.*

**(Required) Signature of participant:** \_\_\_\_\_

**(Required) Signature of Parent or Legal Guardian:** \_\_\_\_\_

**(Print or type)** Name (of Parent/Guardian) \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_  
(Daytime) (Evening)

**SPEECH COACH:** Name \_\_\_\_\_

Cell Phone (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

**SCHOOL APPROVAL:** *Coach agrees to Speech State Meet Honor Crew participation as per the information provided with this application and will accompany this student to Speech State Meet. My signature attests that I have read and fully understand the attached information sheet and unconditionally endorse the participation of this student as a member of the Speech Honor Crew.*

\_\_\_\_\_  
**(Signature of Speech Coach is Required.)**

\* Because many students apply and our crew positions are limited, we ask that you not cancel your commitment within the week prior to State Meet, unless due to an extreme emergency.

University of Texas at Austin  
**GENERAL GUIDELINES FOR ESTABLISHING VOLUNTEER RELATIONSHIPS**

(VOL-A1 / June 25, 2013)

**A University volunteer is an individual who**, without the expectation of compensation, performs services directly related to the business of the University. The purpose of these guidelines and the associated forms is to provide University departments with a process that will assist them in properly selecting volunteers, obtaining needed information, and assuring that both the volunteer and the University understand the parameters of the volunteer relationship. Under the Federal Fair Labor Standards Act, a current non-exempt employee cannot be both a paid employee and a non-paid volunteer while performing the same type of work for the same employer. Consult HR if you have questions regarding current University employee volunteers.

**To qualify as a University volunteer**, an individual must meet the minimum qualifications to perform the work assignment and be willing to abide by the University policies and regulations that govern their actions. Departments are responsible for establishing their own volunteer position descriptions and screening process. However, volunteers that are to be assigned to a security sensitive position are required to undergo a screening process, similar to a regular employee, to determine their qualifications and fitness for the assignment, including, but not limited to an interview, reference check and criminal background check. Depending upon the function, volunteers must also meet any necessary licensing and certification requirements.

**A University volunteer may not perform any work until** he or she has completed and signed the volunteer application and the volunteer assignment detailing the work to be performed and agreeing to the relationship of the volunteer to the University. A volunteer under the age of eighteen may not perform any work without the consent of their parent or legal guardian.

**Departments are responsible for providing their volunteers** with the necessary training and supervision to safely carry out their assigned volunteer activities. If the volunteer assignment includes working with machines or equipment, a volunteer cannot perform any work until successful completion of training has been documented. In addition, volunteers working with machines or equipment must be provided with appropriate personal protective equipment.

**Volunteers are not considered employees** for any purpose. Volunteers are University Affiliate (affiliated worker) positions in HRMS. They are not eligible for retirement, health benefits, or workers' compensation as a result of their volunteer status. Although a volunteer does not have the same health benefits and liability protections as a regular employee, there are State and Federal laws that provide volunteers with limited protections from exposure to personal liability while performing duties within the scope of their assignment. In order to assure that volunteers benefit from these protections from personal liability, it is important for departments to specify the scope of their job duties in a written position description at the time of their assignment.

**Volunteers serve at the pleasure** of the University. Accordingly, a volunteer assignment can be terminated at the discretion of the University at any time, without notice or cause or recourse.

University of Texas at Austin  
VOLUNTEER APPLICATION

(VOL-B1 // June 25, 2013)

Volunteer Applicant Last Name	First	Middle	
Home Address: Street	City	State	Zip Code
Home Phone	Mobile Phone	Email	
Drivers License # State Issued	Highest Education Completed/Training/Licenses		
Current Employer	Position		
Have you ever worked for the University of Texas ? If yes, dates of employment, department and job title.			
Have you ever been convicted of a crime other than minor traffic violations? If yes, please explain.			
Emergency Contact Name	Relationship	Phone(s)	

REFERENCES:			
Name:	Relationship	Name:	Relationship
Address:	Phone	Address:	Phone

I understand and agree that I am volunteering solely for personal purposes and without any promise or expectation of compensation, fees, benefits or future employment with the university. I further understand and agree that my volunteer service may be terminated at any time without cause or recourse.

I understand and agree to abide by the rules, policies and procedures of the University of Texas at Austin and all applicable State and Federal laws. Further, I will familiarize myself with such laws, rules, and policies, including conduct, confidentiality, conflicts of interest, ethical behavior, equal opportunity, compliance and safety.

In consideration of my participation as a volunteer, I hereby release and agree to indemnify and hold harmless the University of Texas and its officers, employees and agents from any liability for any loss, cost, or damage to me or my property arising out of or in connection with my activities or performance of my volunteer work. I agree that all information, property and materials received and/or created by me in connection with performance of my volunteer work are property of the University and I will return them promptly upon request or termination of my service.

I certify that all statements in this application are true and complete to the best of my knowledge. I understand that the University of Texas is a government agency and that this application is a government document and that making false statements on a government document is a violation of law. I hereby give the University permission to inquire into my education, references, driving record, employment, and volunteer history.

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Signature of Volunteer Date

University of Texas at Austin  
VOLUNTEER ASSIGNMENT AND SUMMARY OF DUTIES

(VOL-B2 // June 25, 2013)

Volunteer Last Name:			First	Middle
<u>UIL Academic</u>				
Department:				
<u>Honor Crew</u>				
Volunteer Position/Job Title:				
<u>Assist with event operations during the UIL Speech State</u>				
<u>Meet under the direction of the UIL Academic Director</u>				
Summary of Volunteer Position/Job Duties:				
<u>David Stevens    UIL Academic Director    512-471-5883</u>				
Volunteer Supervisor's Name:			UT Position/Job Title	Phone

This is to acknowledge that I desire to volunteer my services, performing the duties listed above and that volunteer services rendered by me will be at the direction of the above named supervisor. Further, I affirm that I understand that I must abide by all University policies and regulations; and that I serve at the pleasure of the University.

\_\_\_\_\_  
Signature of Volunteer Date

APPROVAL OF AUTHORIZED UNIVERSITY PERSONNEL:

\_\_\_\_\_  
Signature of Volunteer Supervisor: Date

\_\_\_\_\_  
Signature of Department Head: Date

University of Texas at Austin  
**VOLUNTEER (MINOR) CONSENT OF PARENT OR LEGAL GUARDIAN**  
 (Required for Volunteers Under 18 Years of Age)

(VOL-B3 // June 25, 2013)

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Volunteer Last Name	First	Middle	
Home Address: Street	City	State	Zip Code
Date of Birth	Drivers License # State Issued		
Honor Crew			
Volunteer Position/Job Title:			
Assist with event operations during the UIL Speech State			
Meet under the direction of the UIL Academic Director.			
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Summary of Volunteer Position/Job Duties:			

I certify that I am the parent/guardian with legal responsibility for the above named volunteer. I have read the volunteer assignment position description above and I hereby grant my permission for him/her to participate as an unpaid volunteer for the University of Texas at Austin. I affirm that I understand that he/she must abide by all University policies and regulations and that he/she will serve at the pleasure of the University. I further hereby consent and agree to his/her release as provided in the volunteer application, and for myself, my heirs, assigns, and next of kin, I hereby release and agree to indemnify and hold harmless the University from any and all liabilities arising out of or incident to my minor child's involvement as a Volunteer, to the fullest extent permitted by law.

\_\_\_\_\_  
 Signature of Parent or Guardian Date

\_\_\_\_\_  
 Print Parent or Guardian Last Name First Middle

\_\_\_\_\_  
 Home Address: Street City State Zip Code

University of Texas at Austin  
VOLUNTEER PHOTO RELEASE

(VOL-D3 // June 25, 2013)

Volunteer Last Name	First	Middle	
Home Address: Street	City	State	Zip Code

**Photo Release**

In consideration of and as a condition of the volunteer opportunity offered to me by the University of Texas at Austin, I, the above named volunteer, hereby grant the University of Texas at Austin permission to publish and use without obligation in print, electronic or video format, for educational, public relations, publicity and promotional purposes for the use and benefit of the University, any photograph, likeness or image of myself either alone or with others and any stories, illustrations and accounts in which I appear in connection with my volunteer service. I understand and agree that I am to receive no compensation of any kind, monetary or otherwise, on account of or arising from the production, publication, recording, rebroadcasting, or other use of such material.

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Signature of Volunteer \_\_\_\_\_ Date \_\_\_\_\_

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Witness Signature (Volunteer Supervisor): \_\_\_\_\_ Date \_\_\_\_\_