



## **Letter of Introduction for Departmental Volunteers**

**\*Only to be used for Volunteers/Observers place at Rush\***

**Date:**

**To:** Thelma Eloby  
Volunteer Coordinator/Volunteer Services  
Hospital Guest Relations Department, 442 Atrium  
Tel: 312-563-3652; Fax: 312-942-5806  
Email: [Thelma\\_Eloby@rush.edu](mailto:Thelma_Eloby@rush.edu)

**From:**

Supervisor Name

Department Name

Extension

Pager

**Volunteer's Name**

**Volunteer's Email**

Please indicate if the volunteer/observer will require International Clearance

Has this individual ever been issued a Rush ID badge before?

**Start Date:**

**Expected End Date:**

**Department:**

**Assignment:**

**Address where volunteer will participate in activities:**

**Number of hours per week:**

**Please see *attached job description* for complete explanation of duties and qualifications.**

*I understand that his/her volunteering is conditional based on the completion of Medical Center requirements, including clearance by Employee & Corporate Health Services – and that the volunteer will be required to sign in at the Volunteer Services office whenever he/she volunteers.*