Safety Committee Consent Form

The Huis ten Bosch Safety Committee is chaired by the Resident Head or a nominee of the Resident Head. All those that volunteer to join this committee may be accepted into this committee, provided they consent to fill in the form below. If a member of this committee violates the privacy of a resident beyond what is reasonably necessary, disciplinary action will follow at the discretion of the Executive Committee. The Safety Committee must fulfil the responsibilities assigned to it as per any relevant University or Huis ten Bosch Rules or Regulations.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (full name),

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (student number), promise to do my job diligently with the required compassion and skill. If I am unable to properly deal with a matter, I will refer the matter to the appropriate body/bodies. I will keep in mind considerations of confidentiality and am aware that the medical information of Huis ten Bosch residents is a sensitive matter and must be kept private unless there are extenuating circumstances. All medical incidents must be kept private unless there are extenuating circumstances. I am aware that I will be held accountable for my actions.

Safety Committee Volunteer’s Signature Date

Karen Swart Date

Residence Head’s Signature

Antoinette Mouton Date

Primarium’s Signature

Jessica Ann Canter Date

Vice-Primarium’s Signature