

IPSA MODEL VOLUNTEER INTERN AGREEMENT

MPs should modify this document as necessary to describe actual working practice, whilst reflecting relevant good practice and legal issues.

This Agreement describes the arrangement between [MP Name] and [REDACTED - name of volunteer intern].

I wish to express my appreciation of your offering yourself as a [Role title] and will do the best I can to make your experience enjoyable and rewarding.

Your role as a volunteer intern is [Role title] and starts on [Start date].

What you can expect from me

You can expect me:

1. to provide you with a thorough induction into your role and any training you need to meet the responsibilities of your role
2. to explain the standards we work to and to encourage and support you to achieve and maintain them
3. to meet you regularly to discuss your experiences in the role and any successes and problems
4. to help support your personal development through the experience you gain in the role.
5. to reimburse the following expenses reasonably and necessarily incurred by you in performing your role:

a) travel to and from your Home to [Travel to] up to a maximum [travel expenses] per day (unless otherwise stated)

b) meal expenses up to a maximum of [Meal expenses] per day

All other expense claims made by you must comply with the requirements of the MPs' Expenses Scheme. All expenses claimed must be supported by receipts.

6. to provide you with adequate training and feedback on any health and safety which may affect you
7. to provide adequate insurance cover for you while you are carrying out your role which have been approved and authorised by us
8. to ensure that the principles of fairness and equal opportunity are applied at all times
9. to attempt to resolve fairly any problems, complaints and difficulties you may have while performing your role.

What I expect from you

I will expect you:

1. to help me fulfil my parliamentary duties by **[Duties]**
2. to perform the role of a volunteer intern to the best of your ability
3. to apply agreed working standards and follow correct procedures, including those relating to health and safety and equal opportunities
4. to maintain confidentiality
5. to meet the agreed time commitments and to give reasonable notice so other arrangements can be made when this is not possible
6. to provide names of suitable referees who may be contacted and to agree to any security or Criminal Records Bureau checks being carried out where necessary.

This agreement is binding in honour only, is not intended to be a legally binding contract between us and may be cancelled at any time at the discretion of either party. Neither of us intends the arrangements set out in this agreement to create an employment relationship between us. Expense re-imbursements will be paid by IPSA directly to you. Please complete your bank details below;

Account Holder Name: [REDACTED]

Bank Sort Code: [REDACTED]

Bank Account Number: [REDACTED]

If this agreement is acceptable to you, will you please sign and return the duplicate copy.

Member's Name **[MP]**

Signature [REDACTED]

Date **[MP signed]**

Volunteer Intern's Name [REDACTED]

Signature [REDACTED]

Date **[Volunteer signed]**

Please note you will also need to complete a registration form using the online expenses system. Please select 'New Claim/Form', then 'REGISTRATION: Intern/Volunteer'. The intern's name should be entered in the 'Details' field. Once you have submitted this form, please print it and send it to us with this signed agreement. Please call 020 7811 6400 if you have any problems.