

CITY OF ROSEVILLE, CALIFORNIA

ADMINISTRATIVE REGULATION

APPROVED:



W. Craig Robinson, City Manager

Number:

A.R. 2.12

Date Effective:

April 7, 1999

Date Revised:

October 4, 2007

SUBJECT: VOLUNTEERS/NON-CITY PERSONNEL

PURPOSE

To establish a Citywide policy for utilizing volunteers.

POLICY

When City of Roseville staff utilizes volunteers to perform activities the following procedure will be followed.

PROCEDURE

1. When a new assignment or event that will utilize volunteers is being planned, a "Volunteer Job Description" (attachment A) will be completed and submitted to the Human Resources Department for approval prior to the start of the assignment. Each request will be evaluated on an individual basis. Volunteer assignments that present work with a high level of risk exposure will not be approved.
2. A "Volunteer Application" (attachment B) will be completed by all potential volunteers. The document is available in either paper format or online via the City's volunteer management system. If the paper copy is completed, the department liaison will enter the completed application information into the online volunteer system.
3. Volunteers who have supervisory or disciplinary responsibility over "vulnerable populations" (children, the elderly, individuals that are mentally or physically challenged) will be fingerprinted and cleared before the volunteer assignment begins.
4. Volunteers will sign a "Volunteer Release and Waiver of all Claims" (attachment C) before the volunteer assignment begins. Along with the approved Volunteer Job description, the signed waiver will be forwarded to the Human Resources Department. The original signed copy of the Volunteer Release and Waiver of all Claims will be maintained by the Human Resources Department. The departmental volunteer coordinator overseeing the volunteer assignment is responsible for keeping a copy of the waiver.
5. Volunteers will not begin their assignment until the above steps have been completed and results are entered into the volunteer management system.
6. A brief orientation will be conducted by the department to include:
 - a. Review of the approved Volunteer Job Description

- b. Information about the City, the assigned department, and the specific volunteer activity
- c. Safety information and training for the assignment
- d. Notification of the next new employee orientation/bus tour (attendance is optional)

RETURNING ASSIGNMENT

A volunteer can return to an assignment after a period of inactivity, as long as: all required paperwork is on file, the assignment has not changed in scope, and the period of inactivity has not exceeded six months.

If an assignment has changed or the volunteer has been inactive for a period of six months, steps 1, 3, and 4 under the Procedures section must be completed. The volunteer's information on the Volunteer Application (paper or on-line version) will need to be up dated and verified.

It is the department's responsibility to ensure all paperwork is complete and on file in the Human Resources Department when utilizing volunteers.

UNSOLICITED APPLICATIONS

Unsolicited volunteer applications received in the Human Resources Department will be sent to department liaisons that match the interests of the volunteer. Department liaisons may contact the potential volunteer directly.

Departments in need of volunteers may also search the online volunteer management system for potential volunteers at anytime.

VOLUNTEER JOB DESCRIPTION

Job title: _____

Does this position supervise/discipline minors?

YES

NO

If **Yes**, list date fingerprint results were attained.

Note: results MUST be received prior to starting volunteer assignment.

Date received: _____

Goal/purpose of the position: _____

Duties: _____

Supervised by: _____

Degree of supervision: _____

Type and length of training provided: _____

Qualifications (education, experience):

Required: _____

Desired: _____

Personal attitudes and characteristics needed (desire to work with children, mature judgement, well organized, etc.): _____

Special requirements and conditions: (minimum age, background check): _____

Benefits for volunteer: _____

Known hazards/risks: _____

Department:	
Volunteer Supervisor:	Risk Management Approval by:
Signed:	Signed:
Extension:	Extension:
Date:	Date:

**CITY OF ROSEVILLE
VOLUNTEER APPLICATION**

NAME:		Last	First	Middle Initial						
ADDRESS:	Number	Street	Apt. No.	City	State	Zip Code				
HOME PHONE:	WORK PHONE:		CALIFORNIA DRIVERS LICENSE #							
()	()		Class:	Exp. Date:						
Are you under age 18?		<u>Month</u> and <u>Day</u> of Birth (optional)			Email Address:					
Please answer the following questions. If the answer to any of the questions is YES, please give details to the right.										
		YES	NO							
1.	Do you have a disability which may limit your ability to perform the job for which you have applied?	<input type="checkbox"/>	<input type="checkbox"/>	_____						
2.	Have you, as an adult, been convicted of a violation of the law, excluding minor traffic violations? A YES answer will not automatically disqualify you.	<input type="checkbox"/>	<input type="checkbox"/>	_____						
3.	Have you ever been discharged from a position?	<input type="checkbox"/>	<input type="checkbox"/>	_____						
4.	Have you ever worked for the City of Roseville?	<input type="checkbox"/>	<input type="checkbox"/>	_____						
EDUCATION: Circle the highest grade you completed: 1 2 3 4 5 6 7 8 9 10 11 12 or more										
High School Graduate _____ YES _____ NO		Passed High School Equivalency Tests _____ YES								
Certificate of Training, Licenses of Professional Registration _____										
WORK EXPERIENCE: Are you presently employed? (Check as many as apply)										
_____	Employed full-time	_____	Employed part-time	_____	Temporarily unemployed					
_____	Full-time student	_____	Part-time student	_____	Looking for work					
CURRENT EMPLOYER OR SCHOOL:										
Name _____										
Address _____			Phone _____							
PREVIOUS WORK EXPERIENCE: _____										
Reference: _____										
WHAT TYPE OF VOLUNTEER JOB ARE YOU MOST INTERESTED IN AT PRESENT?										
WHAT ARE YOUR PRESENT GOALS FOR A VOLUNTEER JOB? (e.g., gain school credit, work experience, etc.)										
Times Available:	M	T	W	TH	F	Sat	Sun	Mornings	Afternoons	Evenings
Length of Assignment Desired:	3 mos	6 mos	6-12 mos	More than a year	Spot jobs	Special Projects				
Do you have transportation to and from your volunteer assignment? Yes <input type="checkbox"/> No <input type="checkbox"/>										

VOLUNTEER SELF-INVENTORY OF SKILLS AND ABILITIES

I do these things:

I have these skills & abilities to offer:	Very Well	Well	So-So	Not at all	Comment
SPEAK & PERSUADE: Skill in expressing ideas; ability to influence others					
TEACH & TRAIN:					
WRITING: Creative, grants, reports					
RECORD KEEPING & REPORTING: Filing; keeping neat, accurate records; take minutes					
USING STATISTICS & NUMBERS: Ability to collect & analyze figures; to compute & estimate					
ARTISTIC SKILLS: Draw, paint, photograph, design					

Check appropriate skills or areas of interest you have:

Key: SK=Skilled INT:Interested

SK	INT		SK	INT	
___	___	Receptionist	___	___	Computer Training
___	___	Filing	___	___	Working with: (Circle)
___	___	Data Entry			Adults
___	___	Public Relations/Publicity			Seniors
___	___	Teacher/Trainer			Adolescents
___	___	Writer (Newsletter, Manuals)			Children
___	___	Mass Mailings			Disabled
___	___	Photocopying	___	___	Cultural Arts
___	___	Painting/Drawing	___	___	Photography
___	___	10-Key	___	___	Ham/CB Radio
___	___	Typing	___	___	Emergency Preparedness
___	___	Telephoning	___	___	Marketing
___	___	Carpentry	___	___	Computer Systems Applications
___	___	Recreational Activities	___	___	Inventory
___	___	Sports Officiating	___	___	Special Events
___	___	Coaching			
		Library			Police
___	___	Covering New Books	___	___	Graphic Arts
___	___	Shelf Reading	___	___	Recruiting
___	___	Mending Library Materials	___	___	Videotaping
___	___	Working with Video Collection	___	___	Computer Trainer
___	___	Collection Maintenance	___	___	Crime Prevention
___	___	Working with Audio Collection	___	___	Research
___	___	Processing Library Materials	___	___	Survey-taking
___	___	Putting Books in Order/Shelving	___	___	Bilingual Translator
___	___	Assisting with Children's Program			
___	___	Entering Data in Library Computer			

Other Skills and Abilities (List & Describe): _____

Would you be willing to be "on-call" for special assignments? Yes No

CITY OF ROSEVILLE
VOLUNTEER'S RELEASE AND WAIVER OF ALL CLAIMS
INCLUDING PHOTOGRAPH RELEASE FOR SPECIAL EVENTS

My name is _____. I am over the age of 18. (If under 18 years old, a parent/guardian must also sign the release form.)

It is my intention to perform voluntary services without compensation for the City of Roseville as a:

(Volunteer Job Title)

(Department/Division)

I understand that I am not eligible for Workers' Compensation benefits in the event of injury, and I will not under any circumstances receive any other type of compensation. As a Volunteer your personal insurance, including health, automobile and liability insurance are in effect while acting within the scope and course of your assigned duties. The City provides excess insurance, which will cover expenses in excess of your personal insurance or will serve as primary insurance should you not have personal insurance coverage in place. Risk Management implements the City's insurance programs and will coordinate the processing of any claims made by Volunteers.

I have read the project description, and am aware of the possible hazard(s). I am aware that in volunteering I may incur personal injury and/or property damage. I desire to release the City of Roseville from any financial responsibility for any personal injury and/or property damage I may incur as a result of my voluntary services, even when it results from the negligence of the City or its employees.

I understand and have been advised that I may have rights under Sections 1542 of the Civil Code of California which reads as follows: "A general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him must have materially affected his settlement with the debtor."

I expressly waive any rights conferred under that code section, as well as any similar law of any state or territory of the United States. I release the City and all of its employees or officers, and waive all claims against them, for any personal injury (including death) and/or property damage I may incur as a volunteer, including damage incurred as a result of the negligence of any employee, agent, or servant of the City of Roseville.

No promise, inducement, or agreement has been made to me to induce me to release the City of Roseville from liability for any personal injury and/or property damage incurred by me as a result of my voluntary services, nor has any promise inducement, or agreement been made to me in return for the express waiver of rights referred to above.

I understand that if I act outside the scope, authority and/or policies and procedures of the City of Roseville, I could be subject to a lawsuit against me for which the City of Roseville will not defend. I also understand that I could be subject to monetary and/or property loss or, depending on the circumstances, imprisonment.

Further, I acknowledge that the Communications Division is responsible for producing and publishing a variety of newsletters, brochures, fact sheets, guides, flyers and other informational materials. The Communication Division is also responsible for COR-TV (City of Roseville Government Access Channels 14 and 74) and other city video production services.

I hereby irrevocably authorize the City of Roseville Communication Division or anyone authorized by the Communication Division or City Manager's Office to use, reproduce or publish any and all photographs or videotapes of me, which may be taken during my participation in a volunteer event, for any purpose, without compensation to me.

This Release and Waiver of all Claims is entered into this _____ day of _____, 20____, at Roseville, California.

Print Name (Volunteer): _____ Address: _____

Telephone: _____ Email: _____

Signature (Volunteer): _____

Print Name of Parent/Guardian, if under 18: _____

Signature of Parent/Guardian, if under 18: _____

Emergency Information

This section is for emergency contact purposes and will only be used in cases of emergency.

Emergency Contact Name: _____ Phone: _____

Physician name: _____ Phone: _____

Are you under a physician's care? _____ If yes, please specify:

Are you taking any medication? _____ If yes, please list them:

Please list any allergies/existing medical conditions:

Allergies: _____

Existing medical conditions:

Application certification:

I hereby certify that all statements made in this release and in my online application are true and I authorize investigation of all matters contained herein and in my online application. I acknowledge that any false statements or misrepresentation on this release or any other part of my application will be cause for refusal of placement or immediate dismissal at any time during the period of my placement. I am aware that a background investigation will be required before placement in the Police or Fire Departments, and for any volunteer position that supervise vulnerable populations. I am aware that fingerprinting will be conducted for all volunteer positions that supervise vulnerable populations.

Signature of Application (Volunteer): _____ Date: _____

Declaration of Witness: The above individual, in my presence, acknowledged that he/she had read and fully understood the meaning and consequences of the Release and Waiver of All Claims, and he/she signed it in my presence.

Print Name: _____ Date: _____

Signature of Witness: _____

Interviewed by: _____ Date: _____

Department Referred to: _____ Representative: _____

Return completed forms to:
City of Roseville
Volunteer Center
311 Vernon Street
Roseville, CA 95678

For additional Information, call Volunteer Center: 916-774-5205