

Volunteer Agreement Form

Volunteer Name: _____ Date: _____

Phone: _____ E-Mail: _____

Volunteer Location Information

Department: _____ Campus: _____ Position Title: _____

Supervisor Name _____ Supervisor Title: _____

Brief description of job: _____

JOB DESCRIPTION ATTACHED

THE FOLLOWING INFORMATION IS NEEDED FOR INSURANCE COVERERAGE PURPOSES:

Start Date: _____ End Date: _____

Scheduled Days: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Start time: _____ End time: _____ Approx. hours/week: _____

The college may provide any of the following to assist with your volunteer assignment, as applicable:

- Equipment: computers, phones, etc.
- Office Space/Classroom
- Materials and supplies
- Appropriate training and support

Volunteer agrees to the following terms, as applicable:

- To attend all scheduled and agreed upon volunteer assignments
- To notify the appropriate contact person as far in advance as possible in the case of illness or other emergency
- To follow College policies and procedures
- To perform assigned duties in a safe and efficient manner
- To comply with legal and regulatory requirement, including the Family Education Rights and Privacy Act (FERPA)
- To authorize RCC to run a criminal background check if required for the position assignment
- To be familiar with the RCC Volunteer Handbook

Signatures:

Volunteer: _____ Date: _____

RCC Supervisor: _____ Date: _____

Department Head/Dean/VP: _____ Date: _____

Human Resources: _____ Date: _____



Human Resources
3345 Redwood Highway
Grants Pass, OR 97527
www.roguecc.edu/humanresources

Volunteer Confidentiality Agreement and Background Check Pre-Authorization

I understand that by the virtue of my assignment, if selected for a volunteer opportunity, at Rogue Community College (RCC), I may have access to records, which contain individually identifiable information, the disclosure of which is prohibited by the Family Educational Rights and Privacy Act of 1974. I agree to maintain the confidentiality of all information with which I come in contact as a volunteer at the college. I will not share information pertaining to student academic, financial, or disciplinary actions with anyone other than current college staff/faculty who have a legitimate educational interest.

I acknowledge that I fully understand that the intentional disclosure by me of this information to any unauthorized person could subject me to criminal and civil penalties imposed by law. I further acknowledge that such willful or unauthorized disclosure of confidential information also violates the standards of RCC and could constitute just cause for disciplinary action including termination of my volunteer assignment regardless of whether criminal or civil penalties are initiated.

If you have any questions at all as to what specific information is confidential, you must ask your supervisor.

I understand that per RCC policy, I may be required to pass a national and/or state background check to the satisfaction of RCC prior to beginning work as a volunteer. I understand I will be required to provide personal information required to complete the background check including my accurate social security number, current address and date of birth. Failure to provide this information when requested will result in the withdrawal of approval to be a volunteer for RCC.

Acknowledgement

I acknowledge that I have read and understand the information above and agree to all of the conditions of the agreement.

Signature of Volunteer/Applicant

Printed Name

Date

Insurance Coverage and Responsibilities of Volunteers

Our volunteer program has an excellent safety record, and we do not anticipate that you will be involved in an accident resulting in bodily or physical property damage. However, it is important that you understand the extent to which your activities with the volunteer program are covered by insurance carried by Rogue Community College.

Rogue Community College provides volunteers with certain insurance coverage as described below. Please read the following and sign below. If you have any questions, please ask your manager, supervisor, or Human Resources.

Volunteers are not covered by Worker's Compensation. They are covered by a minimal accident-only policy covering volunteer workers, while performing approved volunteer duties. The policy has a limit of \$25,000 per accident and the policy pays secondary to any person's own medical coverage (unless the person does not have medical insurance). *All volunteers are urged to have his/her own health insurance coverage.*

Volunteers are also covered, while working on RCC property, for liability in the event of property damage or accidental injury to the public as a result of your performance of assigned volunteer duties.

All volunteers are responsible for automobile liability insurance on his/her own vehicle and are urged to evaluate the extent of his/her coverage before deciding to use the vehicle in the course of volunteer work with the Volunteer Program.

Transportation of adults or children is strongly discouraged by Rogue Community College.

Limitations: Rogue Community College will NOT provide you with insurance coverage, and you may be personally responsible for any bodily injury, property damage, or damage to a vehicle if:

1. Your actions are contrary to or not part of those duties assigned to you in your job description or by an authorized manager or supervisor; or
2. You act recklessly, maliciously, with the intent to cause damage or injury; or
3. You are accused of a crime; or
4. You fail to cooperate fully with RCC Risk Manager and legal counsel, or you act in a manner that is against the College's interests.

I have read and understand the above information on Volunteers and Insurance Coverage. I understand that if I am involved in any accident, or if I have knowledge of any situation which may result in an injury to any person or property, I am required to immediately report the incident to my assigned manager or supervisor.

Signature of Volunteer

Printed Name

Date