

the cooperage project Volunteer Agreement Form

CONTACT INFORMATION (REQUIRED)

Name: _____ Date: _____

 Last First

Address: _____

 Street City State Zip

Contact Info: _____

 Cell phone Landline Email

Emergency Contact Name: _____ Phone: _____

** Individual volunteers under 18 years of age must be accompanied by a legal guardian**

INTERESTS AND AVAILABILITY

Current employment status: Student PT FT Per diem Retired

Any special talents, skills, or certifications that you possess (eg. food service experience, childcare provider, past employment or volunteer placements, etc): _____

Please indicate the types of activities in which you may like to participate:

- ___ Senior Meals or other food distribution
- ___ Pop Up Club or other youth programs
- ___ Leading activities at public events
- ___ Flier and rack card distribution and hanging
- ___ Work days

Please indicate the days and times that you prefer to be available:

- ___ M-F 8am to 5pm ___ Weekends: vary, or specify: _____
- ___ M-F 2:30pm-5pm Other: _____

Would you like to receive our monthly newsletter, *The Scooperage*, via email? ___Yes ___No

Do you have any health problems we should be aware of? ___Yes ___No

If yes, what? _____

Do you have any unique or special skills you are willing to share? ___Yes ___No

If yes, what? _____

Where/how did you first learn of The Cooperage Project?

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The Cooperage Project greatly appreciates the dedicated service of volunteers. We could not exist without you! The following policies have been developed to ensure you have a safe, productive and rewarding volunteer experience at The Cooperage Project. Please read and sign at the end of this document.

The Cooperage Project commits to:

- Providing adequate information about our mission, work and opportunities for volunteer involvement
- Providing extensive and varied opportunities for volunteer involvement in our mission
- Providing feedback and, when appropriate, opportunities for greater responsibility
- Being receptive to all comments from volunteers regarding ways in which we can better accomplish our mutual mission

We ask that volunteers commit to the following policies:

Attendance

Please call/email ahead to schedule appropriate times to volunteer. Volunteers may contact the Volunteer Coordinator (Jessie Richter) who can then provide a schedule to the volunteers and other staff as appropriate. We are generally unable to accommodate walk-in volunteers. Volunteers are requested to arrive promptly for the volunteer assignment, or notify the Volunteer Coordinator or assigned supervisor in advance if they are unable to come in at their scheduled time. This will allow The Cooperage Project to plan for your absence.

Use of The Cooperage Project Assets

Confidentiality: All information and data about clients, agencies, volunteers, staff and donors of The Cooperage Project is strictly confidential and may not be taken or discussed outside the office or with any unauthorized person.

Personal Use of Items: Food and non-food items are donated to The Cooperage Project for various purposes. Products donated for distribution to agencies and clients cannot be used for any other purpose. As a result, volunteers are not permitted to remove donated items from the building for personal use and consumption. Any unauthorized removal of The Cooperage Project property or information is theft and is illegal.

Illness

Volunteering with the The Cooperage Project could involve contact with at-risk and immunosuppressed populations. For that reason, we ask and expect that all volunteers are in good health. If you are ill or have been ill recently, please notify the Volunteer Coordinator and reschedule your volunteer service.

Safety

The Cooperage Project maintains a drug and alcohol free work environment in all aspects and reaches of its programs. Volunteers who abuse alcohol or drugs are a danger to themselves and others. They will not be permitted to continue as The Cooperage Project volunteers.

Drug Free Workplace Policy

The Cooperage Project is a drug free work zone and prohibits the use or sale of any controlled substance by staff and volunteers including alcohol. If a volunteer reports for work under the influence, they will be sent home and not welcome to return.

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Expectations of the Volunteer

The volunteer will:

- Comply with the by-laws, policies, procedures, rules, and regulations of the organization, including complying with any contracts or agreements executed with or by the organization
- Devote their full time and attention during volunteer hours to the business and interests of the organization
- Comply with the following expected standard of ethical conduct at all times while volunteering with the organization:
 - Treat others with respect and refrain from negative or disparaging remarks or conduct
 - Refrain from any behavior that constitutes harassment, where harassment is defined as comment or conduct directed towards an individual or group, which is offensive, abusive, racist, sexist, degrading or malicious
 - Refrain from the use of power or authority in an attempt to coerce another person to engage in inappropriate activities
 - Adhere to all Federal, state, county or municipal laws
- Immediately report any incidents, injuries and/or unsafe conditions or practices to any staff member of The Cooperage Project _____ (Initials)

Confidential Information

Confidential information includes, but is not limited to, software, know-how, trade secrets, technical personal information, and business information relating to the organization's plans, development models, inventions, products, services, finances, customers, members, marketing, future business and sponsorship plans and any other information which is identified as confidential by the organization. It also includes third party information which is received by the organization in confidence, including information received from clients, customers, potential business partners, sponsors, buyers, and others.

The volunteer agrees:

- Not to publish, communicate, divulge, or disclose to any unauthorized third party or parties any Confidential Information, without the prior written consent of the organization
- Not to allow other persons or third parties access to the Confidential Information
- To Use Confidential Information solely as may be required in connection with the volunteer's responsibilities to the organization _____ (Initials)

Image Release

The volunteer authorizes the organization to photograph and/or record their image and/or voice and to use this material to promote the organization through the media of newsletters, websites, television, film, radio, print and/or display form. The volunteer further consents that the materials and copyright will remain the sole property of the organization. _____ (Initials)

Sexual Harassment

The Cooperage Project prohibits sexual harassment of all kinds. This policy applies not only to volunteers, but also to employees, customers, guests, vendors, and anyone else doing business with The Cooperage Project. Any volunteer who feels that he or she has been a victim of sexual harassment, or who believes that he or she has witnessed sexual harassment, should (if possible) directly and immediately inform the harasser that the conduct is unwelcome and that he or she must stop. The victim should also notify a staff member immediately.

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Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, offensive remarks about a person's sex, and other verbal or physical conduct of a sexual nature. Such activities are illegal under the following circumstances:

- Submission is made a term or condition, either explicitly or implicitly, of an individual's employment.
- Submission to or rejection by an individual is used as a factor in decisions affecting that individual's employment.
- Their purpose or effect interferes with an individual's work performance or creates an intimidating, hostile, or offensive work environment.

Sexual harassment includes many forms of offensive behavior, including the harassment of a person of the same gender as the harasser. The harasser can be the victim's supervisor, an agent of the employer, a supervisor in another area, a co-worker, or a nonemployee. The victim does not have to be the person harassed but could be anyone affected by the offensive conduct.

Examples of sexual harassment include, but are not limited to, the following:

- Unwelcome sexual flirtation, advances or propositions
- Verbal comments related to an individual's gender or sexual orientation
- Explicit or degrading verbal comments about another individual or his or her appearance
- The display of sexually suggestive pictures or objects in any workplace location, including transmission or display via computer
- Any sexually offensive or abusive physical conduct
- The taking of or the refusal to take any personnel action based on a volunteer's submission to or rejection of sexual overtures
- Displaying cartoons or telling jokes that relate to an individual's gender or sexual orientation

It is important to The Cooperage Project that all volunteers are protected from harassment. Any incidents that are perceived as harassment will be investigated and appropriate action will be taken by The Cooperage Project.

I acknowledge that I have received this copy of The Cooperage Project's Sexual Harassment Policy, and I understand that it is my responsibility to read and comply with the policy and any revisions made to it. I acknowledge that retaliating or discriminating against a volunteer who reports a suspected incident of sexual harassment or who cooperates in an investigation is prohibited. I acknowledge that employees or volunteers who violate this policy or retaliate against an employee or volunteer in any way will be subject to disciplinary action, up to and including termination. _____ (Initials)

Zero Tolerance Policy

Employees, contractors and volunteers of The Cooperage Project are strictly prohibited from engaging in sexual misconduct, inappropriate behavior, sexual abuse or sexual harassment with clients or other staff/volunteers. Instances of sexual misconduct and/or inappropriate behavior jeopardizes the safety of all staff, volunteers and clients.

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Sexual misconduct and inappropriate behavior are defined as actions of a staff person, contractor or volunteer that are not beneficial to the client. Sexual abuse is defined as a sexual act where the victim does not consent is coerced into a sexual act by overt or implied threats of violence, or is unable to consent or refuse. Detailed examples of sexual misconduct, inappropriate behavior, sexual abuse, and sexual harassment can be found in the Volunteer Handbook- please contact the volunteer coordinator if you would like a copy.

It is difficult, if not impossible, to describe all of the situations that would constitute sexual misconduct or inappropriate behavior. Any volunteer who has a question concerning possible misconduct must request advice from their supervisor. If you or other volunteers experience any challenges in our programs related to these behaviors, we require that it is immediately reported to a staff supervisor. Staff is required to immediately intervene, challenge, and/or report any inappropriate behavior of clients in order to promote a safe and professional workplace. All instances of sexual misconduct or inappropriate behavior must be documented and a supervisory investigation must ensue.

I understand sexual misconduct, inappropriate behavior, sexual abuse, and sexual harassment with clients or other staff/volunteers is prohibited at The Cooperage Project. I acknowledge that employees or volunteers who violate this policy or retaliate against an employee or volunteer in any way will be subject to disciplinary action, up to and including termination. _____ (Initials)

Policy on Use

Every volunteer required to sign this document will be provided with a copy of the complete form. Volunteers are encouraged to bring all paperwork home to review or to have it reviewed by a parent or legal guardian in order to ensure their understanding and comfort with the guidelines.

All volunteers of the The Cooperage Project and its programs, regardless of age, must completely read and sign this Liability Waiver and Emergency Contact information prior to starting work. If you are under the age of 18 years, a parent or legal guardian must sign this waiver also. We deeply appreciate your services and want to indicate our commitment to do the very best to assist you in your volunteer efforts.

Description of Risk: It is possible that your involvement could result in personal injury. The Cooperage Project staff member will provide training to alert volunteers to possible dangers and work condition risks. Please read and acknowledge understanding of risks associated with each area. Risks include but are not limited to bending, stooping, reaching, kneeling, lifting, and carrying. I certify that I am in good health and physically able to perform such work. I acknowledge that this volunteer work may involve risk of injury from such work, and I agree that I am volunteering for The Cooperage Project at my own risk. _____ (Initials)

Volunteer Agreement: In signing this Liability Waiver, I agree that I am willingly volunteering with The Cooperage Project and its programs. I agree to work in a safe and responsible manner. I agree to only perform work that I am comfortable doing and that I feel I can accomplish safely. If I am not comfortable with a task, I will immediately notify the staff. I agree I am wearing proper clothes and shoes that I believe will provide protection according to the work conditions. _____ (Initials)

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Release: I hereby release The Cooperage Project, any and all sponsoring organizations or partners, property owners from any and all claims that may arise from or result in any expenses, personal injury, loss, or damage incurred to me or by me during my participation with The Cooperage Project.

_____ (Initials)

Information Waiver: I understand that any information I choose to provide The Cooperage Project will be held in confidence, and that The Cooperage Project and its programs may use and reproduce anonymously compiled survey results, including any information I may have provided, for purposes of program evaluation, communication and publication.

_____ (Initials)

I certify that I have read and understand the guidelines contained in The Cooperage Project's Volunteer Agreement. I intend to follow the above guidelines and understand that my continued service will be contingent upon my ability to work productively and safely within these guidelines.

Legal Signature of Volunteer

Date

Printed Full Name of Volunteer

If volunteer is under the age of 18:

Legal Signature of Parent or Legal Guardian

Date

Printed Full Name of Parent or Legal Guardian

Signature of Organization Representative

Date

Printed Name of Organization Representative

Volunteer Coordinator:

Jessie Richter

jessie@thecooperageproject.org

570.253.2020 ext. 4