In the Rooms of the Board of Supervisors

County of Inyo, State of California

I, HEREBY CERTIFY, that at a meeting of the Board of Supervisor of the County of Inyo, State of California, held in their rooms at the County Administrative Center in Independence on the 13th day of *October*, 2009 an order was duly made and entered as follows: See Attached

CAO-Risk Mng./ Volunteer Policy The Risk Manager, Ms. Marlena Baker, briefly noted the proposed changes to the volunteer policy and responded to questions from the Board. Moved by Supervisor Arcularius and seconded by Supervisor Cervantes to adopt the updated County of Inyo Volunteer Policy. Motion carried unanimously, with Supervisors Cash and Fortney absent.

WITNESS my hand and the seal of said Board this 13th

Routing	
CC	
Purchasing Personnel	-
Auditor	_
CAO	,
Other Risk Manager	_0
DATE: October 16, 2009	7.7

Day of	OCTOBER_	_ 2009
	Sam Lings	
\rightarrow	TORO L	

Patricia Gunsolley, Assistant

By:



AGENDA REQUEST FORM

BOARD OF SUPERVISORS

COONTION					
☐ Consent	□ Departmental	☐Correspondence Action	☐ Public Hearin		
Scheduled	d Time for	Closed Session	Informational		

AGENDA NUMBEŔ

For Clerk's Use Only

FROM: County Administrator - Risk Management Division

FOR THE BOARD MEETING OF: October 6, 2009

SUBJECT: County of Inyo Volunteer Policy

DEPARTMENTAL RECOMMENDATION:

Request that your Board adopt the updated County of Inyo Volunteer Policy.

SUMMARY DISCUSSION:

Attached for your review and consideration in the updated County of Inyo Volunteer Policy. The prior Volunteer Policy was adopted in 1999. The policy was updated in order to:

- Adopt a procedure to conduct and clarify what volunteer assignments require a background check. Sensitive assignments triggering a background check include working one-on-one with children, individuals with disabilities, or senior citizens, and access to or custody of cash, equipment, or confidential information.
- Implementing a volunteer enrollment so that appropriate excess insurance for the volunteer may be maintained.
- Comply with legal mandates for the use of volunteers, including the Fair Labor Standards Act.
- Clarify what expenses, reimbursement, and nominal fees may be provided to Volunteers.
- Advise volunteers of the insurance provided for their volunteer work.

ALTERNATIVES:

Not adopt the updated policy or provide direction to staff to change or modify the policy.

OTHER AGENCY INVOLVEMENT:

County Counsel, Health & Human Services and Probation have reviewed the policy. The Sheriff's Department was consulted regarding background checks.

FINANCING:

The County already purchases volunteer insurance. There may be some minor expense to departments for the mileage reimbursement and nominal fees to be paid to volunteers.

APPROVALS	
COUNTY COUNSEL:	AGREEMENTS, CONTRACTS AND ORDINANCES AND CLOSED SESSION AND RELATED ITEMS (Must be reviewed and approved by county counsel prior to submission to the board clerk.)
	Approved: YES Date 9.9.9
AUDITOR/CONTROLLER:	ACCOUNTING/FINANCE AND RELATED ITEMS (Must be reviewed and approved by the auditor-controller prior to submission to the board clerk.)
	Tuta Iley Approved: Is Date 9/14/19

PERSONNEL DIRECTOR:	PERSONNEL AND RELATED ITEMS (Must I	be reviewed and approved by the direct	tor of personnel services prior to
-EKSONNEE BIKEOTOK	submission to the board clerk.)	1	0/11/10
	1 X W	Approved:	Date
	See L		
DEPARTMENT HEAD (Not to be signed until all app (The Original plus 20 copies	SIGNATURE: rovals are received) of this document are required)	Any Company	Date: 09-16-09

COUNTY OF INYO VOLUNTEER POLICY

PURPOSE:

The purpose of this policy is to encourage and enable Inyo County Departments to utilize and support volunteers. It is the intent of this policy that volunteering will be of mutual benefit to the volunteer and the County.

DEFINITION OF VOLUNTEER:

- A volunteer is an individual who performs hours of service for the County of Inyo
 for civic, charitable, health, humanitarian, recreational, public safety or general
 welfare reasons, without promise, expectation or receipt of compensation for
 services rendered, except for reimbursement of expenses, nominal fees or a
 combination thereof.
- Individuals shall be considered volunteers only when their services are offered freely and without pressure or coercion, direct or implied, from the County.

An individual shall not be considered to volunteer if the individual is otherwise employed by the County to perform the "same type of services" as those for which the individual proposes to volunteer. The phrase "same type of services" means similar or identical services. The Fair Labor Standards Act prohibits such practice. In marginal cases, departmental volunteer coordinators shall contact Personnel for clearance. Volunteers do not supplant County employees; they assist paid staff or provide services that constitute elements of regular County positions and augment the established and mandated services of the County.

REQUIREMENTS FOR USE OF VOLUNTEERS:

Departments utilizing volunteers will designate an employee who will be the department volunteer coordinator. The coordinator shall be responsible for:

- (1) Developing job descriptions and duties for volunteers.
- (2) Coordinating with Risk Management to ensure background checks are conducted for sensitive assignments. Sensitive assignments include, but are not limited to:
 - a. Assignments that involve access to or custody of cash, equipment, drugs or confidential information;
 - b. Assignments involving the rendering of one-on-one services to children, individuals with disabilities, or senior citizens; and
 - c. Assignments to County departments that dispense County benefits to the public.
- (3) Ensuring that all that volunteers complete and submit Volunteer Enrollment documents. Those documents shall be provided to Risk Management prior to the volunteer start date so that appropriate insurance may be maintained.

- (4) Obtaining clearance from Personnel and Risk Management for situations involving "same type service" and "sensitive assignment" issues.
- (5) Ensuring that orientation and training is provided to the volunteer so that tasks may be performed in a safe manner.
- (6) Ensuring that volunteers are advised of and comply with applicable rules and regulations, including, but not limited to safe work practices and maintaining confidentiality.
- (7) Fully informing the volunteer of medical and liability coverage.
- (8) Notifying Risk Management of any incident with injuries, property damage or that may result in a claim.

ORIENTATION AND TRAINING:

Orientation of new volunteers provides them with background and general information about the department and enables the volunteers to understand how their volunteer position fits in with overall operations. The content of the orientation will vary from department to department depending on the special situations unique to each department.

All volunteers must receive training necessary to enable them to do the work of their volunteer assignments. This training may be on-the-job or formal in-service group training. The training should take into consideration individual needs, knowledge, abilities and skills and should focus on the tasks the volunteer will be performing. In most instances the supervisor will conduct on the job training.

GENERAL AND AUTOMOBILE LIABILITY AND ACCIDENT INSURANCE:

The County of Inyo shall purchase the following excess insurance to cover the activities of volunteers while acting for or on behalf of the County.

- Excess Accident Medical Coverage: \$50,000 excess of Medicare, Medicaid, and
 any other insurance that the volunteer has in place. Pays up to \$50,000 for
 medical treatment, hospitalization and licensed nursing care required as the result
 of a covered accident.
- Excess Automobile Liability Insurance: \$500,000 excess of the volunteer's own insurance. The volunteers must maintain auto liability coverage at least equal to the state required minimums.
- Excess Volunteer Liability Insurance: \$1,000,000 protection for volunteers who are liable for bodily injury or property damage arising out of the performance of their duties. The coverage is in excess of and noncontributing with any other valid and collectible insurance the volunteer has.

VEHICLE OPERATION:

Volunteers may be authorized to operate personal vehicles in the course of their volunteer duties in accordance with the following procedures:

- Volunteer must authorize County to obtain DMV Driving Record Pull Notice;
- DMV Record must exceed standards outlined on Volunteer Driving Standard Form.
- Volunteers must provide Proof of Insurance that meets the minimum requirements of the State of California.

Volunteers shall not operate County vehicles.

PAYMENT OF EXPENSES, BENEFITS OR FEES:

Volunteers may be paid expenses and nominal fees, or any combination thereof, for their service without losing their status as volunteers. Examples include, but are not limited to:

- Mileage reimbursement for specific functions requiring personal vehicle use.
- Reimbursement for tuition, training registration, transportation and meal costs involved in attending classes.
- A gift card, nominal fee, monthly or annual stipend as long as the fee is not a substitute for compensation and is not tied to productivity.

RIGHT OF REFUSAL AND TERMINATION:

The County of Inyo accepts the service of volunteers with the understanding that such service is at the sole discretion of the County. The County retains the right to refuse the services of a volunteer or terminate the volunteer assignment at any time.

RECOGNITION:

It is the policy of the County that volunteers receive recognition for their contributions. Such recognition may include:

- Thanking a volunteer for his/her efforts.
- Recognizing the volunteer's potential and using it.
- Asking the volunteer of his/her opinion.
- Going to lunch occasionally with the volunteer.
- Receiving class credit for volunteer work.

COUNTY OF INYO – VOLUNTEER ENROLLMENT

Please provide the jollowing	injormation,
Your Name:	
Street Address:	
City:	Zip: Telephone No.:
Name and telephone number	of person to be contacted in case of an emergency:
Name:	
Telephone No(s):	Relationship
Your Driver's License Numb	er:Expiration Date:
Auto Insurance Company:	Policy Number:
Health Insurance Company: _	Policy Number:
The following information to	be completed by the Department Volunteer Coordinator:
Position:	Location:
	Starting Date:
Ending Date:	
individuals with disabilities	ed (services to children, one-on-one services to or seniors; access to or custody of cash, equipment, mation; assignments to Departments that dispense ic).
Yes: Da	te Completed:
No:	
	Department Volunteer Coordinator

COUNTY OF INYO - VOLUNTEER AGREEMENT

This form constitutes an agreement between the County of Inyo and volunteer (name):

The Volunteer Agrees to be Available:

HOURS				DAY	S OF W	EEK		
From	То	Sun	Mon	Tue	Wed	Thu	Fri	Sa

Assignment Start Date:	End Date:
Assignment Description:	

As a Volunteer, I understand, and agree with the following:

- 1. I am not an employee of the County of Inyo and am offering my services freely and without pressure or coercion, direct or implied, from the County. I am not entitled to nor expect to receive any present or future salary, wages, or other benefits for these voluntary services.
- 2. The County purchases the following excess insurance (excess over all other collectible private insurance I maintain) to cover the activities of myself while acting on behalf of the County: (a) Excess Accident Medical Coverage of \$50,000; (b) Excess Volunteer Liability Insurance of \$1,000,000; and (c) Excess Automobile Liability Insurance of \$500,000. I understand that the County does not provide workers' compensation coverage for volunteers.

As a Volunteer, I realize I am representing the County of Inyo during my assigned hours. It is my responsibility to understand, agree with, and fulfill the following:

- 1. Be courteous with the public in their requests for information and services.
- 2. Accept the training, guidance and supervision provided by my supervisor.
- 3. Conduct myself with professionalism and perform duties to the best of my ability.
- 4. Inform my supervisor when my time or knowledge may be insufficient to complete the assigned task.
- 5. Maintain and exhibit a neat and clean appearance.

Volunteer Signature & Date

6. Inform my supervisor when unable to report to assignment or of intent to resign.

As a supervisor of the above named Volunteer, I understand and agree to the following:

- 1. To provide orientation and training to the Volunteer as it pertains to respective assignment.
- 2. To utilize the Volunteer's time effectively and have assignments prepared.
- 3. To notify the Volunteer in advance if services are not needed.
- 4. To value and respect the Volunteer for their service to the public.

I VICC II	the public.
	Supervisor Signature & Date

COUNTY OF INYO - VOLUNTEER AGREEMENT

Sensitive Assignment - Background Required

BY	Y SUBMI	onstitutes an agre ITTING THIS A KGROUND CH	PPLICAT	TON, Y	OU AR ELF. T	E AUTI HIS CH	HORIZI ECK W	ING A /ILL B	E MADE
		RECORD SOUR HALLENGE AN							
1. 2.	Do you use drugs illegally? Yes No Have you ever been convicted as an adult of a criminal offense? Yes No. Provide dates, locations and penalties. Exclude traffic violations under \$150 and convictions more than two years old for violation of Health and Safety Code sections 11357(b) or (c), 11360(b), 11364, 11365, and 11550 as related to marijuana. Conviction is not necessarily a bar to volunteering								
4. 5.	Have you ever been charged with child neglect or abuse? Yes No. Have you ever been charged with elder abuse? Yes No. Has your driver's license ever been suspended or revoked? Yes No. Other than the above, is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance and care of young or elderly people? Yes No. If Yes, explain:								
		The Vol	unteer Ag	rees to k	oe Avail	able:			
	НО					S OF W			
Fro	m	То	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Assignme	nt Start D	ate:			End Da	ite:			
Assignmen	nt Descri	otion:							s

As a Volunteer, I understand, and agree with the following:

- 1. I am not an employee of the County of Inyo and am offering my services freely and without pressure or coercion, direct or implied, from the County. I am not entitled to nor expect to receive any present or future salary, wages, or other benefits for these voluntary services.
- 2. The County purchases the following excess insurance (excess over all other collectible private insurance I maintain) to cover the activities of myself while acting on behalf of the County: (a) Excess Accident Medical Coverage of \$50,000; (b) Excess Volunteer Liability Insurance of \$1,000,000; and (c) Excess Automobile Liability Insurance of \$500,000. I understand that the County does **not** provide workers' compensation coverage for volunteers.

As a Volunteer, I realize I am representing the County of Inyo during my assigned hours. It is my responsibility to understand, agree with, and fulfill the following:

- 1. Be courteous with the public in their requests for information and services.
- 2. Accept the training, guidance and supervision provided by my supervisor.
- 3. Conduct myself with professionalism and perform duties to the best of my ability.
- 4. Comply with all rules and regulations regarding confidentiality and the code of conduct.
- 5. Inform my supervisor when my time or knowledge may be insufficient to complete the assigned task.
- 6. Maintain and exhibit a neat and clean appearance.
- 7. Inform my supervisor when unable to report to assignment or of intent to resign.

As a supervisor of the above named Volunteer, I understand and agree to the following:

- 1. To provide orientation and training to the Volunteer as it pertains to respective assignment.
- 2. To utilize the Volunteer's time effectively and have assignments prepared.
- 3. To notify the Volunteer in advance if services are not needed.
- 4. To value and respect the Volunteer for their service to the public.
- 5. Track time when required for class credit or practicum experience.

Volunteer Signature & Date	Supervisor Signature & Date

COUNTY OF INYO VOLUNTEER DRIVING STANDARDS FORM

VOLUN	ITEER:	DATE:
DRIVE	R'S LICENSE NO.:	DEPT:
INSUR	ANCE CARRIER/POLICY NUMBE	R:
	wledge that I received and read this I reviewed the standards.	Driving Standards Form and that I carefully
of my p a volunt	rivate motor vehicle. A satisfactory of	which I am being assigned requires operation driving record is required for appointment to on of a motor vehicle. My driving record will w.
I under appointi	stand that I must notify my super ment, I fail to maintain a satisfactory	visor if, during the time of my volunteer driving record.
DEFINI	TIONS:	
•]	oublic safety. Examples include, but under the influence of intoxicants, his one lude a law enforcement officer, draccident: Accidents will be determined to be	ous convictions that indicate a disregard for are not necessarily limited to: driving while t-and-run, reckless driving, fleeing or trying iving with a suspended or revoked license. ned to be non-preventable when there is no abstract section of the Department of Motor ion is defined as a citation issued under the similar code of another state (e.g. speeding,
STANE criteria	ARDS: Except where the law ma will be utilized as a definition of an U	y require a higher standard, the following INSATISFACTORY driving record:
1. <i>2</i> .	One conviction of a major or capital v Iwo or more accidents or moving vic	violation during the preceding 36 months. Plations during the preceding 36 months.
	y that my personal driving record Driving Standards.	is satisfactory as described by the County
DATE:		Signature

INYO COUNTY VOLUNTEER POLICY

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Definition of Volunteer

Requirements for Use of Volunteers

- A. County Volunteer Coordinator
- B. Department Responsibilities
- C. Volunteer Responsibilities
- D. Interns
- E. Placement
- F. Insurance
- G. Vehicle Operations
- H. Right of Refusal and Termination
- I. Recognition
- J. Affiliated organizations

Attachments

- Volunteer Request Form
- Volunteer Application
- Volunteer Contract
- Driving Standards Form

INYO COUNTY VOLUNTEER POLICY

PURPOSE

The purpose of this policy is to encourage and enable County of Inyo Departments to utilize and support volunteers.

It is the intent of this policy that volunteering will be of mutual benefit to the volunteer and the County.

Use of volunteers is not intended to nor will it replace existing County employees, but will enhance public services, prevent the reduction of public services or to perform functions beyond the current capacity of County Departments.

DEFINITION OF VOLUNTEER

The term "Volunteer" is defined as a person, who, of his/her own free will, provides goods and services without any financial gain. A volunteer can also be defined in the following ways:

- Non-paid individual who offers services for a limited time;
- An intern who receives academic credit but no stipend from the County
- Individual who chooses to donate time and talents to the recipients of County services;
- Member of an organization designed to support a specific entity, e.g. "Friends of Museum".

REQUIREMENTS FOR USE OF VOLUNTEERS

A. County shall designate a volunteer program coordinator.

Initially, the Personnel Office will serve as a clearing-house for recruitment of volunteers and will distribute application materials to potential volunteers. Departments will submit volunteer requests to personnel office, which will maintain a database of volunteer opportunities and forward potential volunteers to appropriate departments for screening. Personnel will add a message to its voice mail, re: volunteer services.

In the long term, if funding can be identified to support a volunteer program coordinator, coordinator will also be involved in:

- 1. Recruitment and screening of volunteers
- 2. Training of volunteers and Departmental volunteer coordinators
- 3. Operation of other federal and state-funded volunteer programs
- 4. Coordination with educational institutions, community organizations, hospitals, etc.

B. Each Department utilizing volunteers will designate a management employee responsible for volunteers working in the Department.

The Department is responsible to:

- 1. Develop job description and duties, which benefit County and volunteer and forward to personnel.
- 2. Train, supervise and evaluate volunteers

- 3. Assure that client confidentiality is maintained.
- 4. Maintain records pertaining to volunteer including:
 - a. volunteer application
 - b. volunteer contract confidentiality statement
 - c. volunteer time records.
- 5. Provide safe and healthful work environment. May include health screening, immunizations and infection control training in some cases.
- 6. Conduct thorough background checks for some assignments.

C. Volunteer Rights and Responsibilities

Volunteers are viewed as a valuable resource to the County. Volunteers shall be extended the right to be given meaningful assignments, the right to be treated as equal co-workers, the right to effective supervision, and the right to recognition for work well done. In return, volunteers shall agree to actively perform their duties to the best of their abilities and to remain loyal to the goals and procedures of the County.

Volunteers are required to:

- Complete and sign Volunteer application, contract and driving standards form.
- Follow the policies and procedures developed for the Department or Division in which they are placed.
- Maintain strict confidentiality regarding client identity and privileged agency information.
- Notify supervisor if unable to appear for work.

D. Interns

Volunteer program will attempt to establish relationships with Cerro Coso Community College, College of La Verne, local secondary schools and other educational institutions to encourage interns to work for credit and experience in their fields of study. Interns will follow volunteer procedures.

E. Volunteer Placement

Upon completion of the volunteer application, Department Volunteer Coordinator or designated supervisor, will interview volunteer, review job description and agency expectations. If Department wants to use volunteer, volunteer and Department representative shall sign the volunteer contract.

F. Liability, Worker's Compensation

The County of Inyo shall purchase the following excess insurance to cover the activities of volunteers while acting for or on behalf of the County:

- 1) Excess Accident Medical Coverage: \$25,000 for medical treatment, hospitalization and licensed nursing care required as a result of a covered accident. This insurance is excess of volunteer's private medical insurance.
- 2) Excess Auto Liability Insurance: Protects the volunteer driver for bodily injury or property damage claims up to \$500,000. This insurance is excess of volunteer's private automobile liability insurance.
- 3) Personal Liability Insurance: Provides coverage up to \$1,000,000 for personal injury or property damage liability claims arising out of the performance of the volunteers' duties. This coverage is excess of any other valid collective insurance the volunteer may have.

G. Vehicle Operations

Volunteers can be authorized to operate personal or county vehicles in the course of their volunteer duties according to the following procedure.

- 1. Volunteer must authorize County to obtain DMV Driving record Pull notice.
- 2. DMV Record must exceed standards outlined on County Volunteer Driving Standard form.
- 3. County will purchase volunteer excess insurance.
- 4. County Risk Manager must authorize all volunteer vehicle use.

On a Department by Department basis, mileage reimbursement may be available to volunteers for specific functions requiring vehicle use.

H. Right of Refusal and Termination

County retains the right to refuse the services of a volunteer or terminate the volunteer assignment for any reason.

Recognition

An integral part of the Volunteer Services Program is the conscientious use of recognition.

After a volunteer has been interviewed, oriented and trained, it is important for the volunteer to be appreciated and recognized. In addition to a formal recognition for all volunteers annually, volunteer supervisors should provide recognition for their volunteer in a variety of ways. Some examples may include:

- By giving constructive feedback about their work, either formally in a meeting with a
 volunteer or informally on the job;
- Provide opportunities for volunteers to give feedback about the Department or program;
- Go to lunch occasionally with a volunteer;
- Thank them personally for their service.

At one board meeting each year, the Board of Supervisors will acknowledge volunteer contributions.

Support Organizations, Affiliated Groups

It is the policy of the County to encourage the formation of groups dedicated to supporting facilities or programs such as the Libraries, Museums or Senior Centers.

Such groups may be formal non-profit organizations, unincorporated associations or chapters of national organizations such as AARP. These organizations often may conduct meetings or coordinate events in County facilities. In addition, these organizations often maintain close communication with County staff regarding priorities for programs or facilities.

Unless specified in a contract, agreement or memorandum of understanding, these groups shall not act as agents or representatives of the County. Even though such groups are raising funds for the benefit of County projects, group must maintain separate bank accounts and accounting records. Distribution of the funds should be made by the leadership of the group. No County employee should be involved in dispersing funds raised by these support groups.

VOLUNTEER REQUEST FORM

22	DATE:
DEPARTMENT:	DIVISION:
CONTACT PERSON:	PHONE:
SUPERVISING STAFF MEMBER:	PHONE:
JOB DESCRIPTION	
Work Location (building address)	
Responsibilities	
Qualifications (skills, interests, and experience)	
Number of Volunteers Needed	Days: Hours:
Probable Duration of Volunteer Assignment:	Date Needed:
Automobile F Required: Yes No	Facility Handicap Accessible Yes No Partially
Department Head Signature	Date:

VOLUNTEER APPLICATION

1. NAME:
2. ADDRESS:
3. HOME PHONE: 4. WORK PHONE:
5. SOCIAL SECURITY NUMBER:
6. DRIVER'S LICENSE:
7. PERSON TO CONTACT IN CASE OF EMERGENCY:
8. SCHOOL/CURRENT OCCUPATION;
9. LANGUAGES OTHER THAN ENGLISH:
10. ARE YOU 18 YEARS OR OVER:
11. If you are under 18 the law requires that you meet one of the following requirements:
a. High School Graduate or GED:b. Posses a work permit:
12. Have you worked for Inyo County before:
13. Do you have any relatives working for the County YES: NO:
14. Have you ever been convicted of a felony or misdemeanor other than minor traffic violation (if yes please list)
15. If you have a condition, which would prevent you from performing any of the essentia duties of the position, please list those duties and the accommodation, which you would require in order to perform the duties. Reasonable accommodation will be made when requested and determined by the County to be appropriate under applicable law:
16. Have you been a Volunteer for a governmental entity before? If so, please describe your duties:

	×
What special skills do y	you have to offer, languages, hobbies, interest, etc?
Type of volunteer assig	nments your are interested in?
tor/Mentor: vironment:	Office Work:Public Safety: Other:
Check applicable age §	group:
-17 18-20	21-35 36-54 55+
. What do you hope to g	rain from volunteering?
evelop skills	Personal satisfaction
hool requirement/credit_	Court orders
Check all groups you	would be interested in working with:
e-school: lults:	School age: Teens:
. Times available to vol	unteer:
. Are you interested in	working on special event projects?
	uld like to add about yourself?

VOLUNTEER CONTRACT

Volunteer	Department
Address	Work Phone
Job Title	Date
 RESPONSIBILITIES OF DEPART Initial and ongoing training and some personnel record (contract, work of Review by the end of the first more future work references. 	TMENT: apervision. evaluations, etc.) nth.
 RESPONSIBILITIES OF VOLUNT Fulfillment of time commitment a Evaluation of supervision, training Report numbers of hours worked Serve in capacity as described in the 	as listed below. g and work experience at exit interview. on first of each month to Department Supervisor.
WORK HOUR – Total hours per wee Duration of Volunteer Contract To be reviewed on Starting Date Final Work Date	
ability; report to work on time, when	ne tasks outlined in my job description to the best of my a scheduled; if unable to report I will call my supervisor; to ntiality; observe the same rules and policies as paid staff; oal and objectives; and, give my supervisor adequate notice ices.
In addition, I acknowledge and under County of Inyo.	stand that I am only a volunteer and not an employee of the
"release" this agreement and therefor	et to the County, I also realize that the County may re, release me from my volunteer services at anytime. As alless from and against any dismissal action.
The Department agrees to provide ad evaluation and training; and, to treat	lequate workspace for me; provide ongoing supervision, me fairly and with respect.
consider alternative volunteer opport	not what I wish to do, I can meet with my supervisor to tunities. Also, by the end of the first month, my supervisor mine if I meet the qualifications of this position.
Volunteer	Supervisor
Date	Date

COUNTY OF INYO VOLUNTEER DRIVING STANDARDS FORM

Volunteer	SSN:
Department	Position
Drivers License	InsuranceCarrier
I acknowledge that I received carefully read and reviewed	l a copy of the "County of Inyo Driving Standards" and that I he standards.
motor vehicle. A satisfactor employment on County position	the position to which I am being assigned requires operation of driving record is required for appointment to and for continued ions which require the operation of a motor vehicle in the course of grecord will be evaluated against the standards listed below.
disregard for public safety. E	Major or capital violations are serious convictions which indicates xamples include, but are not necessarily limited to the following; injury or property damage results; hit and run; negligent homicid
Incidents: An incident is def	ned as a preventable accident or moving violation.
	be determined to be a non-preventable where there is no te under the abstract section of the Department of Motor Vehicle
 Moving Violation: A mo Motor Vehicle Code, or vehicles, expire license, Citations for faulty equip 	ving violation is defined as a citation issued under the California similar code of another state, and includes citations for unregistered icense not in possession, suspended licenses, or revoked license, ment shall be considered moving violations except those involving als, brake lights, or license plate lights. All other citations will be plations.
STANDARDS	
definition of an UNSATISFA	quire a higher standard, the following criteria will be utilized as a
	r or capital violation during the proceeding 36 month period is
2. One conviction of driving	under the influence of alcohol or drugs during the proceeding 36
	ed unsatisfactory. not exceed the operation of a motor vehicle for more than 4,000 nore incidents during the proceeding 36 month period is considered
I certify that my personal d Driving standards.	riving record is satisfactory as described by the County of Iny

Date

Signature