



*"Serving the San Jacinto Valley Since 1965"*

**Volunteer Policies & Procedures & Waiver**

1. Volunteers are a very important part of the success of the Community Pantry.
2. Volunteers must be fourteen years and older. Any volunteer under the age of 18 must be accompanied by an adult.
3. **Individuals convicted of a violent crime or any type of domestic abuse will not be accepted as volunteers.**
4. The Community Pantry will only consider misdemeanor offenses. Case number must be provided (see application).
5. Court mandated, or community service volunteers may be asked to complete additional documentation and verification with an appropriate agency and will be validated by the Community Pantry.
6. All matters pertaining to clients will be kept strictly confidential.
7. Volunteers must not report to the Community Pantry or any Community Pantry function under the influence of alcohol or any other mind-altering drug or substance.
8. Dress is expected to be appropriate. **Nothing that may be a health or safety hazard or revealing will be permitted (i.e. loose fitting clothing or jewelry, open-toed shoes, sunglasses).** If applicable, name tags must be worn at all times.
9. Volunteers agree to accurately record their volunteer time on the volunteer attendance sheets.
10. If a volunteer has a question or a problem, he or she must go to the Executive director, supervisor or to the volunteer coordinator.
11. When representing the Community Pantry in public, all volunteers agree to act responsibly and professionally, upholding the mission of the Community Pantry.
12. No forms of harassment will be tolerated. The Community Pantry is committed to providing a work environment where women and men can work together comfortably and productively, free from all forms of harassment, sexual or otherwise.
13. Volunteers understand that information contained on their applications will be verified by the Community Pantry. They understand that misrepresentations or omissions may be cause for their immediate rejection as an applicant for a volunteer position with the Community Pantry or their termination as a volunteer.
14. Eating is allowed only in the Pantry office or outdoors. Food in the warehouse is not for volunteer consumption. There is no smoking in the warehouse, waiting room, offices or parking lot areas. No Smoking anywhere on the City of Hemet Property. Cell phones and other electronic devices are not allowed to be used while in the facility.
15. Volunteers must report any accidents or injuries to the Executive Director, supervisor or the volunteer coordinator. Report all injuries including minor injuries such as bruises or scrapes. Fill out an accident report provided by your supervisor.
16. Volunteer understands and agrees to being video and audio recorded for the purpose of safety and theft. There are recording cameras throughout the property and they are being recorded everywhere throughout the pantry property, except private areas like the restrooms. The cameras are indoors and outdoors of the pantry property.

**In return the Community Pantry agrees to:**

1. Provide adequate volunteer training, 2. Provide adequate space and good working conditions, 3. Maintain record of their volunteer hours, 4. Provide references and/or confirmation of hours worked (with advance notice), 5. As an equal opportunity employer, it is our policy to ensure that each volunteer is accorded equal treatment and opportunity.

**IN CASE OF EMERGENCY, PLEASE NOTIFY**

1) Name \_\_\_\_\_ Relationship \_\_\_\_\_ Day Phone (\_\_\_\_) \_\_\_\_\_

2) Name \_\_\_\_\_ Relationship \_\_\_\_\_ Day Phone (\_\_\_\_) \_\_\_\_\_

(Continued)

## Safety Standards and Emergency Procedures

The Community Pantry strives to ensure a safe workplace, and it is the responsibility of each volunteer to adhere to the following:

1. Work according to good safety practices as posted, instructed and discussed.
2. Refrain from any unsafe act that might endanger oneself, the people we serve or co-workers.
3. Use all safety devices provided for your protection – failure to comply with safety requirements could result in immediate dismissal.
4. Report any unsafe or unprofessional situation or acts immediately to the Executive Director, supervisor or volunteer coordinator. .Any sexual acts or comments are not allowed and the volunteer will be removed immediately.
5. Must comply with all health department regulations for the storing and handling of food, as instructed by the Executive Director, supervisor or the volunteer coordinator.

## Volunteer Waiver & Work Agreement

1. As a volunteer of the Community Pantry, I hereby agree to hold harmless and waive any and all claims or causes of action against the Community Pantry arising out of any cause whatsoever, including but not limited to claims arising out of negligence or intentional conduct of its employees or agents.
2. I attest that I am physically fit and prepared to perform the tasks assigned to me as a Community Pantry volunteer.
3. I shall not operate a personal vehicle for volunteer activities unless I have at least the minimum amount of liability insurance required by California law. I further agree to use my personal insurance as the primary provider in the event of injury due to my work as a volunteer for the Community Pantry.
4. I agree that the Community Pantry is not responsible for loss or damage to my personal property.
5. I also grant the Community Pantry full permission to use photographs of me.
6. **I agree that all data, materials, knowledge and information generated through, originating from, or having to do with the Community Pantry or persons associated with its activities, including contractors, is to be considered privileged and confidential and is not to be disclosed to any third party. All pages, forms, information, designs, documents, printed matter, policies and procedures, conversations, messages (received or transmitted), resources, contacts, e-mail lists, e-mail messages, client, staff or public information is confidential and the sole property of Community Pantry .**
7. **I agree that confidential information also includes, but is not limited to, any information of, or relating to, our staff, clients, operations and activities. This privilege extends to all forms and formats in which the information is maintained and stored, including, but not limited to hardcopy, photocopy, automated and/or electronic form.**
8. **I agree that client information, including all file information, will not be disclosed to any third party, under any circumstances, without the consent of the Community Pantry Executive Director or Board of Directors.**

*I have read, understand and agree to the above Community Pantry policies, safety and emergency procedures, and waivers:*

Volunteer's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Print Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

Address: \_\_\_\_\_

If under 18, signature of parent or legal guardian is required and must be accompanied by an adult:

Parent Signature of Minor: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Approved / Accepted by: Jim Lineberger Signature: \_\_\_\_\_ Date: \_\_\_\_\_**  
(Executive Director) (Executive Director)