



VOLUNTEER WORKSTATION MEMORANDUM OF UNDERSTANDING

United Way of Cascade County Retired & Senior Volunteer Program
417 Central Ave., Suite 402, Great Falls, MT, 59403
Phone: (406) 727-3400

Volunteer Workstation: _____

Volunteer Supervisor: _____

Address: _____

Phone: _____ Email: _____

Type of Station: _____ Public Non-Profit _____ Private Non-Profit _____ Proprietary Healthcare

This Memorandum of Understanding (MOU) contains basic provisions which will guide the working relationship between both parties. This MOU may be amended, in writing, at any time with the concurrence of both parties and must be renegotiated at least every three years.

BASIC PROVISIONS OF MEMORANDUM OF UNDERSTANDING:

United Way of Cascade County RSVP

- Recruit, interview, & enroll RSVP volunteers and refer volunteer to the volunteer workstation.
- Provide orientation to volunteer workstation staff prior to placement of volunteers, and at other times, as the need arises.
- Furnish accident, personal liability, and excess automobile coverage as required by program policies. Insurance is secondary and is not a primary insurance.
- Periodically monitor volunteer activities at volunteer station to assess and/or discuss needs of volunteers and volunteer station.
- Reimburse RSVP volunteers for transportation costs between their home and volunteer station in accordance with RSVP policies.

Volunteer Workstation

- Implement orientation, in-service instruction, or special training of volunteers.
- Interview and make final decision on assignment of volunteers. Any and all background screenings, or additional screenings, are the responsibility of the workstation.
- Furnish volunteers with materials required for their assignment including volunteer position/job description.
- Furnish volunteers with transportation required during their assignments if required to go to an alternative location.
- Provide supervision of volunteers on assignments.
- Provide for adequate safety of volunteers.
- Collect and validate appropriate volunteer reports for submission to RSVP office on a monthly basis. Volunteer workstations identified as impact assignments will submit to the United Way of Cascade County RSVP on a quarterly basis documentation of the impact supported by volunteers.
- Maintain the confidentiality of volunteers. Do not provide any other agency the name or other personal information of volunteers without the volunteer's approval.
- Investigate and report any accidents and injuries involving RSVP volunteers immediately to the RSVP office.
- Volunteers cannot receive a fee for service.

OTHER PROVISIONS

Separation from Volunteer Service

The volunteer workstation may request the removal of an RSVP volunteer at any time. The RSVP volunteer may withdraw from service at the volunteer workstation or from RSVP at any time. Discussion of individual separations will occur among RSVP staff, volunteer workstation staff, and the volunteer to clarify the reasons, resolve conflicts, or take remedial action, including placement with another volunteer workstation.

Letters of Agreement

When in-home assignments are made, a letter of agreement will be signed by the parties involved. The document will authorize volunteer service in the home and identify specific volunteer activities, periods, and conditions of service.

Religious/Political Activities

The volunteer workstation will not request or assign RSVP volunteers to conduct or engage in religious, sectarian, or political activities.

Labor/Anti-Labor Organizations

The volunteer workstation will not request or assign RSVP volunteer to conduct or engage in labor or anti-labor activities.

Displacement of Employees

The volunteer workstation will not assign RSVP volunteers to any assignment which would displace employed workers or impair existing contracts for services.

Accessibility and Reasonable Accommodation:

The volunteer workstation will maintain the programs and activities to which RSVP volunteers are assigned accessible to persons with disabilities (including mobility, hearing, vision, mental, and cognitive impairments or addictions and diseases) and provide reasonable accommodation to allow persons with disabilities to participate in programs and activities. In some cases, a station may not be appropriate for every volunteer.

Are there any limitations at your station that RSVP staff should be aware of in making volunteer placements with you?

Yes No If Yes, please describe: _____

Prohibition of Discrimination

The volunteer workstation will not discriminate against RSVP volunteers or in the operation of its program on the basis of race; color; national origin, including limited English proficiency; sex; sexual orientation; age; political affiliation; religion; or on the basis of disability, if the volunteer is a qualified individual with a disability.

RSVP Acknowledgement and Publicity

Specify, either by written information or verbally, the RSVP volunteers are participants in your volunteer workstation’s program in all publicity featuring such volunteers, whether it is radio, TV, print or verbal presentation.

Statistical Reports

Supply statistical data on volunteer impact in community needs to United Way of Cascade County RSVP on a quarterly basis or as requested.

Memorandum of Understanding

Conditions of this Memorandum of Understanding may be amended or terminated in writing at any time at the request of either party. It will be reviewed every three years to permit needed changes. This Memorandum of Understanding contains all the terms and conditions agreed upon by the contracting parties. No other understanding, oral or otherwise, shall be deemed to exist or to bind any of the parties hereto. This Memorandum of Understanding will be in effect upon dated signature of the RSVP staff.

RSVP relies on contributions (both monetary and in-kind) to meet grant requirements. Please check any ways your organization could contribute to RSVP (Optional).

- Send appropriate thank you, birthday, or other volunteer recognition.
- Provide mileage to and from the volunteer’s home and worksite.
- Other _____
- Donation to RSVP for volunteer expenses, such as meals, transportation, and/or the annual recognition event.
 - \$100 \$50 \$25 other amount

Authorizing Signatures:

Volunteer Workstation (Authorized Representative) Date: _____

RSVP Director/RSVP Staff Date: _____