



Dear Potential Volunteer:

Thank you for your interest in working as a volunteer with CitySERVE and the City of Santa Cruz. Once you have selected a volunteer opportunity/internship, please complete the attached paperwork to begin the placement process.

Please submit the following required documents:

- Volunteer Application
- Volunteer Agreement & Release of Liability
- Volunteer Contract Agreement

Supplemental Information:

Fingerprinting Procedure (relevant only if you will be working with 'money, minors or confidential documents')

CitySERVE Insurance Overview (a summary of the insurance coverage offered to all of the City's volunteers while performing volunteer duties)

You may email, fax or hand deliver the required documents. After receiving the documents, I will be in contact with you within the week to follow up regarding any openings with CitySERVE and the City of Santa Cruz Departments.

If you have any further questions please feel free to call or email.

Thank You,

Laurel Keffe

CitySERVE Program Coordinator

cityserve@cityofsantacruz.com

CitySERVE Office
323 Church St.
Santa Cruz, CA. 95060

CitySERVE: (831) 420-5403 Fax 420-5271



VOLUNTEER APPLICATION

CitySERVE Program

City of Santa Cruz



Name: _____ Date: _____
 Home Address: _____ Phone: _____
 City and Zip Code: _____ Email: _____
 Date of Birth: _____ Age: _____

Availability: _____ Hours per day _____ Days per week _____
 Preferred Days (Please circle): M T W TH F SAT SUN
 Preferred Time of day: Mornings Afternoon Evenings
 Length of commitment you seek: Less than 3 months 3-6 months
 6-12 months As long as needed

What are your goals for a volunteer position right now?

Are you currently a student? If so, what school are you attending?

Elementary/Jr. High: _____ High school: _____
 College: _____ Major: _____

Do you have Community Service Hours assigned by the Court? Yes No

Are you currently on bail or your own recognizance pending trial for a criminal offense? Yes No

Have you been convicted, as an adult, of a crime under your name or another name? Yes No

If you answered yes to any questions above, please provide details (offense, when, where and disposition of the case.

Conviction of a crime is not necessarily a bar to volunteering. Each case will be considered separately based on volunteer positions.

Are you, or have you been an employee of the City of Santa Cruz? Yes No If yes, with what department? _____

Emergency Contact: _____ Relationship: _____

Work phone: _____ Home phone: _____

I hereby certify that all statements made in this application are true, and I authorize investigation of all matters contained in this interest form. I am aware that fingerprinting is required for all volunteer assignments related to children and in certain other departments. I understand that this is a non-paid position with no promise, expressed or implied, of consideration for future employment.

Signature of Applicant: X _____ Date: _____

Signature of Parent/Guardian: X _____ Date: _____

(If Applicant is under the age of 18)

Please return to: 323 Church St. Santa Cruz, CA 95060
Phone: (831) 420-5403 Fax: (831) 420-5271

The following information is voluntary and it will help our program evaluate its recruitment practices and compile required statistical reports. The information will not be used to discriminate against or give preference to any individual in any volunteer position. Thank you for your cooperation.

1. How did you hear about this program? Newspaper Website Flier Other: _____
2. Ethnic Origin: Caucasian/White Native American/Alaskan Native African American/Black
 Asian / Pacific Islander Latino/Hispanic Decline to State
3. Gender: Male Female
4. Sign-Up to receive CitySERVE/VIP email's regarding upcoming/on-going volunteer opportunities! YES NO
5. County/City of Santa Cruz Department(s): Please list priority departments/projects of interest:
6. I. _____ II. _____ III. _____ IV. _____



**RELEASE OF LIABILITY
&
VOLUNTEER AGREEMENT**

CitySERVE is a volunteer program created by the Volunteer Center of Santa Cruz County (“Volunteer Center”) and the City of Santa Cruz (“City”) in order to provide volunteer opportunities to the community while improving the City. Participation with CitySERVE is strictly voluntary and bound by the terms of this Agreement. No person may volunteer with CitySERVE prior to CitySERVE’s receipt of this completed Agreement.

- 1. By signing this Agreement I, _____, acknowledge that I am not an employee of the City Department in which I am applying to volunteer or the Volunteer Center and that my performance of voluntary services will be uncompensated. I agree to cooperate with my volunteer supervisor and adhere to the policies of the CitySERVE program at all times in the performance of my volunteer services. I agree that I will not use power equipment, or stand on any object taller than two (2) feet tall, or otherwise engage in dangerous activities while volunteering with CitySERVE. I will not drive any City automobile in connection with my volunteer services.
- 2. I hereby agree to release and hold harmless the City, its officers, agents, employees, and volunteers for any claim for personal injuries and damage to property that I, or anyone claiming under me or on my behalf, may incur arising out of or in any manner related to the performance of my voluntary services or participation with CitySERVE. I further agree to indemnify, hold harmless and defend the City, its officers, agents, employees, and volunteers from any and all claims, demands, actions, judgments, costs, attorney’s fees and damages of any kind for liability which the City may incur arising out of or in any manner related to the performance of my voluntary services or participation with CitySERVE.
- 3. While participating as a volunteer with CitySERVE, I hereby authorize the taking of my picture, by photograph, movie, or videotape or otherwise (“pictures”) for use by the CitySERVE program. I hereby irrevocably consent to and authorize the use and reproduction of such pictures for use by CitySERVE without compensation.
- 4. As a CitySERVE volunteer, you are covered by the Volunteer Center's Volunteer accident and personal injury insurance should you be injured while volunteering in assigned duties that are consistent with the safety rules outlined in this agreement. Please report any injuries immediately to your supervisor, or call the CitySERVE office at 420-5403

Name: _____ CS Department/Project/Event: _____
Address: _____ City & Zip: _____
Telephone: _____ Email: _____
Emergency Contact: _____ Emergency Telephone: _____
Signature: _____ Date: _____

IF VOLUNTEER IS UNDER 18, PARENT OR GUARDIAN MUST SIGN BELOW

I, _____, on behalf of my child, myself, and our representatives, do hereby consent to allow my child, _____, to participate as a volunteer with CitySERVE, subject to all of the terms and conditions above. I further expressly agree, on behalf of my child, myself, and our representatives, to all of the terms and conditions above, including but not limited to paragraphs 1, 2, 3 and 4.

Signature of Parent/Guardian: _____ **Date:** _____

PLEASE RETURN TO:
CitySERVE: 323 Church St., Santa Cruz, CA 95060
Phone: (831) 420-5403
Fax: (831) 420-5271



VOLUNTEER CONTRACT AGREEMENT

Contract must be completed before volunteer begins assignment!!

Volunteer Name: _____ **Phone Number:** _____

Volunteer Supervisor: _____ **Phone Number:** _____

Department/Division: _____ **Address/Rm:** _____

Project Title: _____ **Volunteer Title:** _____

VOLUNTEER SUPERVISOR RESPONSIBILITIES

- Complete any legal requirements (fingerprinting, background etc.) before volunteer begins assignment (fingerprinting needs to be arranged through CitySERVE).
- Provide initial and ongoing training and supervision
- * Complete contract with volunteer and return to CitySERVE program coordinator
- *Inform the CitySERVE program coordinator of any injuries occurring while the vol. is on assignment
- Contact CitySERVE program coordinator regarding any problems during the contract period
- *Inform CitySERVE program coordinator if volunteer vacates position

VOLUNTEER RESPONSIBILITIES

- Log in volunteer hours on timesheets provided
- *Report volunteer hours to the CitySERVE program coordinator each month
- Arrive to assignment on time; inform supervisor if you will be late or absent
- Fulfill time commitment, as listed below
- Contact CitySERVE program coordinator regarding any problems during the contract period
- *Inform supervisor of any injury occurring while on volunteer assignment
- *Contact CitySERVE program coordinator when (or before) leaving position

WORK SCHEDULE: Start Date: _____ **End Date:** _____ **Estimated Hours Per Month:** _____

I understand that as a CitySERVE volunteer I am covered while volunteering under CitySERVE's Volunteer Insurance, and am not covered under the City of Santa Cruz's Worker's Compensation policy. I further understand that the insurance provided by CitySERVE is excess insurance secondary to my existing insurance, should I have insurance. Furthermore, I understand and agree to the responsibilities expected of me while volunteering.

Volunteer Signature : _____ **Date:** _____

I understand and agree to the responsibilities expected of me as a volunteer supervisor and understand that volunteers are covered under volunteer insurance purchased by the Volunteer Center.

Volunteer Supervisor Signature: _____ **Date:** _____

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VOLUNTEER INSURANCE INFORMATION

While the CitySERVE Program has an excellent safety record for its volunteer programs, it is important for you to understand the types of volunteer insurance you are covered under as a CitySERVE volunteer.

Each volunteer is eligible for three kinds of insurance. These policies provide coverage for you while participating in volunteer activities as a CitySERVE volunteer.

The insurance policy certificates are held by the Volunteer Centers of Santa Cruz County. This is not a substitute for any insurance you may now carry, and only applies while you are performing your assignment as a volunteer in the program and while on your way to and from your volunteer site. Complete information regarding volunteer insurance is available from the CitySERVE office.

Accident Insurance:

Our volunteer insurance provides **excess medical coverage** up to \$25,000 per occurrence over and above any other existing insurance. This excess medical coverage is meant to insure that you, as a volunteer, do not have any out of pocket expense due to a volunteer related injury. Our insurance works with your insurance to cover any deductibles or co-pays so that you do not experience out of pocket expense. If you do not have any other insurance, our insurance becomes primary for volunteer related injuries.

Liability Insurance:

All CitySERVE volunteers are provided with Personal Liability Insurance at a limit of \$1,000,000 per occurrence. This policy provides protection for a personal injury or property damage liability claim arising out of the performance of your volunteer duties. This coverage is in excess and non-contributing with any other valid or collective insurance you may have. This policy excludes injury or damage arising out of the use of an automobile. It also excludes errors or omissions in connection with the registered volunteer's professional services.

Excess Automobile Liability Insurance

***** You are not automatically covered for auto insurance – to be covered you must fill out a separate auto insurance form*****

This coverage protects the registered volunteer driver, while driving their personal vehicle, for bodily injury or property damage claims arising out of their volunteer activities. This policy does not apply to volunteers who are driving City owned vehicles. The liability policy is written at a combined single limit as respects bodily injury and property damage of \$500,000 each accident. This policy excludes property damage to property owned or transported by the registered volunteer driver, or in their care, custody or control.

**CITY OF SANTA CRUZ
NEW EMPLOYEE FINGERPRINT PROCESS**

All newly hired regular employees must be fingerprinted prior to their first day of work with the City of Santa Cruz. Fingerprints are taken, via the computerized Live Scan System.

FOLLOW THE STEPS LISTED BELOW TO COMPLETE THE FINGERPRINT PROCESS:

- When you complete your new hire paperwork at the Human Resources Department, 809 Center Street, Room 6, Santa Cruz you will be given a “Request for Live Scan Service” form.
- Complete this form as indicated by the Human Resources staff.
- Take a picture I.D. (Driver’s License, DMV identification card or Passport), the completed "Request for Live Scan Service” form, and Authorization form with you to:

FINGER-PRINTING LOCATION	ADDRESS	BUSINESS HOURS
Santa Cruz County Office of Education	400 Encinal Street Santa Cruz, CA 95060 466-5750	Monday-Friday, 8:30 - 11:30 ONLY Only by appointment
Santa Cruz Live Scan Conor Carey <i>Certified Mobile Live Scan Service</i>	info@SantaCruzLiveScan.com Cruzio 877 Cedar Street Santa Cruz, CA 95060 (831) 621-5041	Monday – Friday 10:00 am – 3:00pm Walk-in- no appointment needed
UPS Store – Capitola Y28	1840 41 st Avenue, Ste 102 Capitola, CA 95010 (831) 462-5909	Monday – Friday 9:00 am – 5:30 pm Saturday 10:00 am – 4:00 pm Walk-in – no appointment needed
UPS Store – Watsonville NB1	1961 Main Street Watsonville, CA 95076 (831) 728-1919 store0993@theupsstore.com	Monday – Friday 9:00 am – 6:00 pm Saturday 10:00 am – 4:00 pm Walk-in – no appointment needed

All Live Scan Fingerprinting fees are paid by the City of Santa Cruz

- The agency that fingerprints you will give you a copy of the "Request for Live Scan Service" form. **Bring this form back to the City of Santa Cruz Human Resources Department immediately after being fingerprinted,** as proof that you have completed the fingerprint process.
- The results of an individual's fingerprint check will typically be sent to the City of Santa Cruz Human Resources Department by the State Department of Justice within three to seven days of the date that you are fingerprinted.
- **You will not be allowed to start work until the City receives your pre-employment fingerprint results. Your hiring supervisor will notify you when you are authorized to begin work.**

FINGERPRINT PROCESS – HUMAN RESOURCES DEPARTMENT PROCEDURES

When a new employee comes to the Human Resources Department to swear in, s/he will be given a New Employee Fingerprint Process form and a Request for Live Scan Service - Applicant Submission form.

The new employee should complete the applicant's information section of the Request for Live Scan Service - Applicant Submission as part of the "Swear-In" process.

The Human Resources staff will check this form for completion and accuracy.

Instruct the new employee to read the New Employee Fingerprint Process form, then ask if there are any questions. Remind the new employee of his/her scheduled appointment. Write his/her appointment date and time on the New Employee Fingerprint Process form.

Instruct the new employee to take the Request for Live Scan Service - Applicant Submission form to a specified fingerprinting agency (location where the HR Staff has scheduled their appointment), the employee must then bring back a copy of the NCR form to the Human Resources Department immediately after being fingerprinted. For new employees going to Santa Cruz County Sheriff-Coroner for Live Scan fingerprinting, they must take a special "authorization form." This "authorization form" will be given to the employee by the Human Resources staff.

Remind the new employee that it is very important that s/he keep their fingerprint appointment as scheduled because it takes up to ten days to get fingerprint results from the Department of Justice, and new employees will not be allowed to begin work until fingerprint results are received by the Human Resources Department.

Log the new employee's name, job title and activity number in the Fingerprint Log.