City Manager's Office

**Administrative Order No: 52** 

Issued: 10/2012: Revised 12/2014

Approved by Joe Sbranti City Manager

## Subject: Volunteer Policy and Procedure

- I. Purpose: The City's volunteer program is designed to coordinate and manage all volunteer efforts which support existing services provided to the community. The volunteer program is designed to effectively match individuals to City Departments that have existing volunteer opportunities. Volunteers may be utilized in programs and activities within the volunteer's skill level. Volunteers shall not be utilized to displace any paid employee.
- II. Procedure: This policy sets forth the City's guidelines on volunteerism.

Definition: A volunteer is a person who offers his/her time and skills without compensation.

- 1. Recruitment: Departments interested in utilizing a volunteer should contact the Human Resource Department for a Staffing Requisition Form. Human Resources will process the Staffing Requisition form for signatures. Once the form is approved. Human Resources shall begin the recruitment for volunteers through an interest in specific functions or department.
- 2. Application: All potential volunteers are to complete a Volunteer Application (Appendix A). Volunteer application forms can be completed online or obtained from the Human Resources Department. The original application is to be forwarded to Human Resources for processing.
- 3. Selection: Once a potential volunteer has been interviewed by the department and reference checks (if needed) are completed, a department may choose to accept or decline a potential volunteer's services. A volunteer may not commence work until a Volunteer Agreement Letter (Appendix B) and fingerprints have been completed.
- 4. Fingerprinting (Live Scan): The City requires all volunteers to be fingerprinted. Human Resources staff will provide Fingerprint Instructions (Live Scan Request Form) to volunteers. Volunteers may not be cleared to begin volunteering until the results from the Department of Justice have been reviewed and received by the Human Resources Department. The Human Resources Department will notify the department that the volunteer has cleared.
- 5. Tuberculosis Testing: A Tuberculosis (TB) test is required for the Recreation Department. Human Resources staff will provide the form for testing.

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6. Background/Medical Exams: Some Police Department volunteer positions may require a background check, pre-employment medical exam, and psychological exam. These examinations shall be coordinated with Police and Human Resources staff.

- 7. Training: Volunteers will receive an overview of their assignment, duties and expectations, days and hours of service, accident reporting, call-in, confidentiality (if applicable), dress code, etc.
- 8. Supervision: Volunteers must be supervised as to assignments, work performance, activity, use of equipment, etc. Performance problems will be corrected or the volunteer will be released from service.
- 9. Use of City Vehicles: With the exception of Police Reserve Officers, volunteers are not allowed to operate any City Vehicles.
- 10. Recognition: Thank you letters, emails and/or verbal thanks are to be given to volunteers as appropriate. Staff and volunteers responsible for volunteer supervision are encouraged to undertake on-going methods of recognition of volunteer service on a regular basis throughout the year.

## **City of Pittsburg Volunteer Application**

Return Application To
Human Resources Department
City of Pittsburg Website
65 Civic Avenue
Pittsburg, CA 94565-3814



Information

<u>Communication Lines</u> (925) 252-4878 www.ci.pittsburg.ca.us

Volunteer Application For	**Y0890-P**
	POSITION FOR WHICH YOU ARE APPLYING

<u>Instructions:</u> A separate application is required for each position for which you are applying. Applications should be printed or typed. Incomplete or illegible applications may not be considered. Resumes are encouraged but will not be accepted in lieu of any portion of the standard City of Pittsburg Volunteer Application. The City of Pittsburg is an Equal Opportunity Employer.

PERSONAL INFORMATION							
NAME (Last, First, Middle)		OTHER NAMES USED (if any)					
ADDRESS			CAL. DRIVER'S LICENSE NO. VALID? SOCIAL SECURITY NO. (optional)				
(Number, Street and Apartment No.)		TYPE OF EI		MENT DESIRE  ☐ Part Time	D □ Temp	orary	
(City, State and	Zip Code)		RESERVE OFFICER	U	S. Citizen or have I.S. Citizenship by opplication?	* *	YES NO
HOME TELEPHONE	WORK TELEPHO	ONE	APPLICAN ONLY		l yrs. of age by the rst examination?	ne date of the	YES NO
E-MAIL ADDRESS (optional)				co	ave you ever be	olation	YES NO
Do you have any relatives servin Boards, Commissions or otherw by the City of Pittsburg?		YES NO		m If	f the law excludi inor traffic viola yes, please expl illy on a separate	ations? lain	
If yes, NAME, POSITION AND RELATIONSHIP:			Name		Position	F	Relationship
Do you have a physical or mental participate in the selection procedescribed in the job announcement As they support your application you possess and/or machinery or	ss or to perform the exert? If yes, please exp for this position, described	ssential funct blain on a sep cribe any job	tions of the posi- parate page your -related skills, k	tion as requeste mowledge	e, special trainin	on. ig, licenses or	□ No
	EDUC	CATION A	AND TRAIN	NING	SHEAR.		12963
Highest Grade Completed High	School 9 10 11	12 C	ollege 1 2 3	4	Graduate Prog	ram 1 2 3	3 4
Name and Location of High Sch	ool	Did You G	raduate?	□ GED	☐ Yes	□ No	
Name and Location of College of	r Trade School	Attended	From			То	
		Degree Re	jects Studied				□ None
Name and Location of College of	or Trade School	Attended	From			То	
Traine and Location of Conege (	11auc Sellooi	Degree Re					□ None
			jects Studied				

	60. 红色的最初的	EXPERIENCE	NO. SECTION AND ADDRESS OF THE PARTY OF THE
	t or most recent employn . Use additional pages as		May we contact your present employer? ☐ Yes ☐ No
Employed From To	Hours Weekly	Employer Name and Add	Iress
Salary	☐ Month ☐ Hour	Employer's Telephone N	umber
Title and Duties		Supervisor's Name	
		Reason for Leaving	
Employed From To	Hours Weekly	Employer Name and Ado	dress
Salary	☐ Month ☐ Hour	Employers Telephone Nu	ımber
Title and Duties		Supervisor's Name	
a.		Reason for Leaving	
Employed From To	Hours Weekly	Employer Name and Ado	dress
Salary	☐ Month ☐ Hour	Employer's Telephone N	umber
Title and Duties		Supervisor's Name	
		Reason for Leaving	
Employed From To	Hours Weekly	Employer Name and Add	dress
Salary	☐ Month ☐ Hour	Employer's Telephone N	umber
Title and Duties		Supervisor's Name	
		Reason for Leaving	
			st of my knowledge and understand that falsification

I certify that the information contained in this application is correct to the best of my knowledge and understand that falsification of this application in any detail is grounds for disqualification or for dismissal of volunteer service. I agree to conform to the rules and regulations of the City of Pittsburg. I consent to and authorize the City of Pittsburg to ask for information concerning me. I further understand that I may be fingerprinted, required to submit to a complete medical examination, to a psychological test and to furnish such proof of age and education as may be requested, or otherwise investigated prior to selection as a volunteer. I release all parties and persons connected with any requests for information from all claims, liabilities and damages for whatever reason arising out of furnishing this information.

Signature	Date
9	

## VOLUNTEER AGREEMENT LETTER

«Date_of_Letter»
«First_Name» «Last_Name» «Address_Line_1» «City», «State» «ZIP_Code»
Dear «First_Name»,
Thank you for your willingness to volunteer your services to the «Department» department of the City of Pittsburg. We appreciate you helping our department with «List_Responsibilities» duties.
As a volunteer you agree to donate your time to the City without compensation. You will begin volunteering on «Start_Date» and may continue for as long as we mutually maintain the relationship. Your schedule will be «Start_Time» -«End_Time».
Volunteers injured in the performance of their duties are eligible for all rights, privileges and compensations provided under the City's workers' compensation plan. A brochure describing the workers' compensation program is enclosed.
Please let me know if you have any questions about your volunteer service to the department. You may also contact Griselda Clift, Human Resources Analyst, at 252-6929.
Again, thank you for your willingness to donate your time, energy and expertise. We really appreciate it.
Sincerely,
«Supervisor_Name» «Supervisor_Title»
I acknowledge my volunteer services as outlined above.
«First Name» «Last Name» Date