Volunteer Agreement of Service

Service as a volunteer with the Indiana State Museum shall begin with an official notice of acceptance or appointment to a volunteer position. Only an authorized representative of the museum, who will normally be the Director of Volunteer Services, may give notice. No volunteer shall begin performance of any position until they have been officially accepted for that position and have completed all necessary screening and paperwork. At the time of final acceptance, each volunteer shall complete all necessary enrollment paperwork and shall receive a copy of their job description and agreement of service with the agency.

As a volunteer of the Indiana State Museum, I agree to the following:

* ***Dress Code:*** As representatives of the Indiana State Museum, volunteers, like staff, are responsible for presenting a good image to our visitors and the community. Volunteers shall dress appropriately for the conditions and performance of their duties.
* ***Identification:*** Volunteers shall wear/carry with them, their volunteer identification while engaged in the business of the Indiana State Museum.
* ***Attendance:*** Volunteers are expected to be reliable in their performance of their volunteer duties. Volunteer attendance is expected to be dependable and punctual.
* *T****raining:*** Volunteers have the right to be fully prepared to perform their volunteer duties as assigned and should attend training classes. The organization has the responsibility to provide the necessary training for satisfactory volunteer performance.
* ***Service Hours***: In order to earn full volunteer benefits, 40 hours or more of volunteer service needs to be given each year after the appropriate training has been received. It is the responsibility of the volunteer to report these service hours.
* ***Confidentiality***: Volunteers are responsible for maintaining the confidentiality of all proprietary or privileged information to which they are exposed while serving as a volunteer, whether this information involves a single staff, volunteer, or overall organization business. Violation of confidentiality is a cause for immediate termination of the volunteer’s relationship with the museum.
* ***Speaking on Behalf of the Organization***: Prior to any action or statement, which might significantly affect or obligate the agency, volunteers should seek prior consultation and approval from appropriate staff.
* ***Performance Review/Evaluation***: Periodic discussions based on the defined objectives of the job description, separate from the annual progress report, will occur between staff and volunteers. Staff, based on their job descriptions, attendance and other criteria, will evaluate volunteers’ progress annually. The purpose of these performance reviews is to:
	+ Motivate the volunteer to aim for the highest performance standards
	+ Identify areas for improvement and how the organization can assist the volunteer to improve
	+ Identify the need for continuing training
	+ Express appreciation for the volunteer’s contributions
	+ Allow both volunteer and organization to suggest changes in the job description
	+ Determine the interest of the volunteer in continuing in the present position
	+ Discuss the volunteer goals and how they might be met

The Indiana State Museum agrees to:

* Provide a written job description of the volunteer position to outline expectations and responsibilities
* Provide the training and materials needed to carry out the responsibilities of the position effectively
* Keep volunteer records in a secure location, accessible only to the Director of Volunteer Services. All requests for information about volunteers must be made through the Director of Volunteer Services who will consider volunteer files as confidential
* Provide an opportunity annually for written feedback from volunteers on their volunteer experience based on their expectations and foster an environment where the volunteer viewpoint is valued
* Recognize that volunteers are partners in implementing the mission and programs of the Indiana State Museum, having an equal but complementary role to play and that the museum understands and respects the needs and abilities of our volunteers
* Provide a clearly identified supervisor who will be responsible for day-to-day consultation, support, and direction
* Provide appropriate recognition and benefits to qualified volunteers (i.e., after the completion of training and 40 hours of volunteer service, a museum membership will be awarded to each volunteer.)

Signed Director of Volunteer Services

Signed

Staff Supervisor

Signed

Volunteer

Dated Dated Dated

State of Wisconsin Department of Administration DOA-3009 (R12/2004)

s. 895.46, Wis. Stats.

### Volunteer Agreement

Bureau of State Risk Management 101 E. Wilson Street, 5th Floor

P. O. Box 77008 Madison, WI 53707-1008

(608) 266-0168



|  |  |
| --- | --- |
| Volunteer Name | Position Title |
| Address | City | State | ZIP + 4 |

Emergency Contact Emergency Contact Daytime Telephone Number

Dates of Agreement (mm/dd/ccyy) Scheduled Hours/Week Schedule (e.g., every Friday, Wednesday through Saturday, varies, etc.) From To

**Volunteer Location**

|  |  |
| --- | --- |
| Name of State Agency | Site/Program/Activity |
| Address | City | State | ZIP + 4 |

Volunteer Supervisor Name Title Telephone Number

This agreement for volunteer services is entered into by and between the volunteer and the State agency named above. The volunteer and the State agency mutually agree to the following responsibilities:

Volunteer

1. Will be under the supervision, direction and control of the supervisor named above.
2. Shall be available for scheduled service time(s) listed above.
3. Understands that s/he is a volunteer and NOT an employee of the State of Wisconsin or the State agency named above and is not eligible for any benefits, including Worker’s Compensation.
4. Understands all duties expected to be performed that appear on the Position Description and that additional duties may be added as needed.
5. Understands all work rules that are to be followed.
6. Understands that the State agency named above will provide no compensation.
7. If volunteer will be driving a State vehicle as part of his/her assigned duties, s/he will only do so after completing a Volunteer Driver Vehicle Use Agreement (DOA-3685), receiving and understanding the statewide Fleet Driver and Management Policies and Procedures, meeting the minimum driving standards, receiving proper authorization to drive a State vehicle, and, when driving a vehicle, will strictly follow the route designated by the agency.

State Agency Named Above

1. Will provide the volunteer with a Position Description describing duties to be performed.
2. Will provide training required to perform the agreed upon duties.
3. Will educate volunteers on safety awareness in the workplace.
4. Will provide necessary volunteer safety and equipment related items.
5. Will subsequently and periodically review work performance with the volunteer.
6. Will regard the volunteer as an **agent** of the State as provided in s. 895.46, Wis. Stats. As an agent of the State, the volunteer will be entitled to all the protections provided by s. 895.46, Wis. Stats.
7. Will review and update this Volunteer Agreement on at least an annual basis.

**Either the volunteer or the State agency named above may cancel this agreement at any time.**

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|  |  |
| --- | --- |
| Volunteer’s Signature | Date (mm/dd/ccyy) |
| Authorized State Agency Representative Signature | Date (mm/dd/ccyy) |

This document can be made available in accessible formats to qualified individuals with disabilities