



Volunteer Application

Return to: Montgomery County Human Resources
451 W. Third Street
Dayton, Ohio 45422
(937) 225-4018

Current Employee of Montgomery County Under 18 years of age Date: Click or tap to enter a date.

Name _____ Nickname _____

Address: _____ Phone _____

Address 2: _____ Work _____

City, State, Zip _____ Cell _____

Email Address: _____

Emergency Contact _____ Phone: _____

How did you become aware of Montgomery County's volunteer program? Choose an item.

Area of Interest	Choose an item.	Location	Choose an item.	Hours Requested	Choose an item.
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Area of Interest	Choose an item.	Location	Choose an item.	Hours Requested	Choose an item.

Are you related to anyone in the Department or Location you wish to volunteer? Yes No

Previous Volunteer Experience Related to this Opportunity:

Previous Work Experience:



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Excluding traffic violations, have you ever been convicted of any criminal offenses? If yes, please explain:

Have you ever had prior disciplines, or terminated for sexual harassment, harassment, inappropriate or unethical conduct? Yes No

Department Use Only

All Volunteers

- | | | | |
|---|--------------------------|--|-----------------------|
| <input type="checkbox"/> JusticeWeb Review | Criminal Justice Council | <input type="checkbox"/> Volunteer PowerPoint Viewed | RECO |
| <input type="checkbox"/> Assignment/Terms | Department Supervisor | <input type="checkbox"/> Agreement Signed | RECO |
| <input type="checkbox"/> Two Step TB test completed (Stillwater Center, Only) | Human Resources | <input type="checkbox"/> Orientation Completed | Department Supervisor |

Non-Supervised Volunteers

- | | | | |
|--|-----------------|---|-----------------|
| <input type="checkbox"/> BCI check completed (Stillwater Center, Only) | Human Resources | <input type="checkbox"/> Required training completed | Human Resources |
| <input type="checkbox"/> All Database checks completed | Human Resources | <input type="checkbox"/> Attestation of offenses Signed | Human Resources |



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Montgomery County Volunteer Agreement

Volunteers are a valuable resource to Montgomery County and have the right to meaningful assignments, professional treatment, and recognition for exemplary contribution of services.

Volunteer participation is open to persons without regard to race, color, religion, gender, sexual orientation, gender identity, national origin, age, disability, genetic information, marital status, or veteran status. Generally, volunteers will be at least eighteen years of age. Exceptions for educational purposes and community service may be made at the discretion of the Director.

Volunteers must comply with all applicable federal and state laws, as well as all applicable policies and procedures of Montgomery County. Per the Fair Labor Standards Act, fourteen and fifteen-year-old volunteers will schedule time only during non-school hours and will work no more than eight hours per day. Minors will also volunteer only between 7 AM and 7 PM.

The Director or designee will approve or disapprove all Volunteer Applications. Disapproval may occur when a conflict of interest is identified. Volunteer assignments are at the discretion of the director or his/her designee.

Volunteers agree that Montgomery County may at any time, without reason, terminate the agency's relationship with the volunteer. Montgomery County will immediately communicate notice of such termination to the volunteer. A volunteer may at any time, without reason, terminate their relationship with the Montgomery County. The volunteer will immediately communicate notice of such termination to the volunteer's coordinator/liaison.

Volunteers are not permitted to drive any Montgomery County vehicle. Volunteers are permitted to ride in county vehicles as part of the participation in the Volunteer Service Program.

Volunteers are not entitled to any Montgomery County benefits or compensation, including, but not limited to, Workers' Compensation.

Volunteers shall be responsible for maintaining the confidentiality of all proprietary or privileged information to which they are exposed while serving as a volunteer. Proprietary or privileged information includes, but is not limited to, customer, citizen, and/or resident name, financial information, social security numbers, date of birth, account information, health status, legal issues, diagnosis and any other resident related information. Volunteers may not take photographs of customers, citizens, and/or resident with a personal camera or cell phone camera without proper consent from Montgomery County. Failure to maintain confidentiality may result in termination of the volunteer's relationship with Montgomery County.

Volunteers shall not be reimbursed for expenses such as meals.



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By signing below, I hereby accept a Volunteer position with Montgomery County, and agree to the following terms and conditions.

Terms and Conditions:

1. I understand that this agreement does not create an employment contract or relationship.
2. I will provide my services strictly on a voluntary basis without any express or implied promise of direct or indirect compensation or payment of any kind.
3. I agree to provide my services without any employment-type benefits, including but not limited to, employment insurance programs, worker's compensation, vacations, sick time, or paid leave.
4. I will familiarize myself and comply with Montgomery County policies and procedures applicable to Volunteers. In particular, I understand Montgomery County expects Volunteers to treat employees, other volunteers and the public in a manner which demonstrates high standards of moral and ethical behavior.
5. I understand that Montgomery County, without notice or hearing, may terminate my services as a Volunteer at any time, with or without reason.

Release:

1. I understand that Volunteer activities on behalf of Montgomery County may place me in a hazardous situation and could result in injury to me or my personal property. On behalf of myself, and my heirs, personal representative and assigns, I hereby release, discharge and indemnify and hold harmless Montgomery County and its directors, officers, employees and agents from any and all claims, causes of action and demands of any nature, whether known or unknown, arising out of or in connection with my Volunteer activities on behalf of Montgomery County.
2. I understand that public relations is an important part of a Volunteer's activities. On behalf of Montgomery County, I hereby authorize Montgomery County to use any photographs of me in its possession for public relations purposes. I ask that Montgomery County use reasonable efforts to give me advance notice of any such use, but release of any photographs for public relations purposes is not conditioned upon such notification.

Signature of Volunteer: _____ Date: _____

If you are under 18, we must have your parent or legal guardian's signature below:

Parent or Legal Guardian (of volunteers age 17 and younger)

As a parent or legal guardian of the above-named volunteer, I hereby give consent for my child or ward, to become a Volunteer for Montgomery County as described in the above Volunteer Agreement and, by the signature below, join in and agree to be bound by the terms and conditions of the Release outlined above on this page.

Signature of Parent/Legal Guardian: _____ Date: _____



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Montgomery County Volunteer Code of Conduct

I understand that the goal of the Montgomery County Volunteer Program is to engage and educate the public on the vision and mission of Montgomery County and to support community development and service. I understand that I can and should always seek guidance if I am ever unclear about the vision, mission or practices of Montgomery County or what I am asked to do.

I agree to conduct myself in an appropriate and professional manner while volunteering for Montgomery County. I further agree to support Montgomery County programs, policies, and practices. I agree to have courteous and professional interaction with any and all Montgomery County employees, patrons, and other volunteers.

As a Montgomery County volunteer, I represent Montgomery County. I also pledge not to engage in any activity, communication or public dissemination, in any manner, either directly or indirectly, publish, communicate or otherwise reveal to any person or entity, or use for any purpose whatsoever, any information, or materials revealed to me during my Volunteer experience, that may cause harm to the reputation of Montgomery County.

I understand that Montgomery County welcomes and relies upon volunteer feedback. If I am ever in disagreement with any philosophy, policy, or practice of Montgomery County, I agree to use the appropriate, established communication channels to share my concerns and/or feedback. The channels are, in order:

1. Communicate first with my assigned supervisor.
2. If I feel my concern was not addressed at this level, I will then communicate it directly to the department Manager.

I understand that I am responsible for reviewing all the materials given to me at orientations and trainings, including the volunteer handbook. If I have any questions or do not understand anything in the materials, I agree to ask my supervisor.

I agree to accept supervision, direction and support from Montgomery County staff and understand that they will provide me with feedback to help me perform my volunteer duties most effectively and safely, and in the best interest of Montgomery County.

I understand that failing to observe the above Code of Conduct could result in my dismissal from the volunteer program. My signature indicates I have read, understand, and agree to abide by the Volunteer Code of Conduct.

Volunteer Signature

Date

Signature of Parent or Legal Guardian
(For volunteers under the age of 18 only.)

Date

Signature of Montgomery County Representative

Date



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Montgomery County Volunteer National Background Screening Consent Form

Applicant's **Legal** Name (printed): _____

Social Security Number _____ Date of Birth _____

Applicant's Address: _____

City: _____ State _____ Zip _____

I, _____, authorize and give consent for the Montgomery County, to obtain information regarding myself. This includes the following:

- Local & National Criminal background records/information
- All 50 State Sex Offender Registries
- Full Address Trace
- Social Security Verification

I, the undersigned, authorize this information to be obtained either in writing or via telephone in connection with my application. Any person, firm or organization providing and/or receiving information or records in accordance with this authorization is released from any and all claims of liability for compliance. Such information will be held in confidence in accordance with the organization's guidelines.

I understand that a criminal report may be obtained at any time after receipt of authorization, and that the Montgomery County reserves the right to deny and/or terminate my volunteer opportunity at any time

Print Name: _____ Date: _____

Signature: _____

Office Use Only – Do Not Write Below This Line

Approved for background screening by: _____ Date _____
Coordinator



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Stillwater Volunteers Only:

Volunteers having direct contact with residents at **Stillwater Center** shall be screened for TB.

Non-supervised **Stillwater** volunteers and those volunteering more than 40 hours during a calendar year working directly with residents shall be subject to a background check through the Bureau of Criminal Investigation (BCI) and verification that they are not included on the Abuser Registry or other Database checks required in Section 5123:2-2-02 of the Ohio Administrative Code. They will also be required to sign an attestation that they have not been convicted or, or pled guilty to any of the offenses listed or described in section 109.572 of the Ohio Revised Code: These volunteers will receive training in:

- Person-centered planning, community participation and integration, self-determination, and self- advocacy.
- Rights of individual with an intellectual or developmental disability
- A review of Department of Developmental Disability (DODD) Health and Safety Alerts
- An overview of the fire safety and emergency procedures

Stillwater Volunteers, who participate on a supervised basis, three or fewer times per calendar year are not required to have a background check through BCI or other Database checks required in Section 5123:2-2-02 of the Ohio Administrative Code.

Stillwater Volunteers, who participate on an episodic supervised basis, (four or more times per calendar year) via organizations (e.g., auxiliaries, church groups, junior leagues, corporate volunteer programs, or student community service activities), are not required to have a background check through BCI or other Database checks required in Section 5123:2-2-02 of the Ohio Administrative Code.