



Guidelines for Volunteers Working with Children

Volunteers who work with children usually have a very distinct impact on the child's life. Volunteers and other personnel in positions of authority should maintain clear and appropriate boundaries when working with children.

Physical boundaries

- Only use physical contact that is appropriate for the development of a particular activity.
- Work within sight of others at all times.

Emotional/verbal boundaries

- Use positive feedback on performance.
- Be encouraging and avoid negative comments.

Social boundaries

- Don't socialize with program participants outside of the program.

Sexual boundaries

- Don't have sexual relationships with program participants.
- Don't touch participants in ways likely to make them feel uncomfortable.

Avoid being alone with a child

To protect both yourself and a child from risk:

- No volunteer should ever be in a one to one situation with a child.
- If a child approaches you and wants to talk to you privately about a matter, do so in an open area and in the sight of other adults.

Maintain control – avoid losing your temper

- Adopt positive language and behavior. Avoid bad or aggressive language that could intimidate a child or set a poor example.
- If you find that you regularly lose your temper with children, you should seek support in learning how to manage your anger and consider whether you have the patience to work with children.

Some ideas to assist with maintaining control include

- Set up some basic rules at the beginning of the season. Be gentle, but direct, be fair, and give clear instructions. Make sure children are aware of the rules.
- Give positive messages, boost their morale.
- Have a time out area for children and young people that are not behaving.

Make sure parents are clear about picking up participants

- Parents/guardians are responsible for the collection of their children from programs on time.
- Have a file of parent/guardian emergency contact numbers and make sure program leaders have access to a phone.
- Avoid the risk of being alone with a child by having a parent / guardian / staff member or volunteer assist you with the programs. Require that person to wait until all children have left.
- Volunteers are not to transport individuals unless there is an extreme emergency.



City of Greenville General Volunteer Service Agreement & Release

I, _____, _____, _____,
First Name Middle Initial Last Name

In consideration of being allowed to participate in the volunteer service of the City of Greenville do hereby agree that:

- 1. Age of Majority and Commitment to Perform.** I am eighteen (18) years of age or older, or I am having a parent or guardian sign the consent and release provided below. I understand and agree to the volunteer duties that I have signed up for through the City of Greenville.
- 2. Volunteer not Employee.** I understand and agree that my volunteer service is in no way an offer of or employment by the City and that I shall not receive, nor be entitled to receive, any compensation, reimbursement or remuneration for my participation in my volunteer service. Further I agree to release the City from any and all claims to compensation, reimbursement, or remuneration related to my volunteer service. I also understand and agree that at no time will I be considered or deemed to be an employee of the City, nor am I an agent for anything other than my assigned volunteer duty.
- 3. Services Refused.** I understand and agree that the City may refuse to accept my volunteer service at any time, whether with justification or not, and at that point I must stop providing those services and stop holding my self out as a volunteer.
- 4. Professional Conduct and Assigned Duties.** I agree to act appropriately and in a professional, courteous manner during my volunteer service. I will not misuse City funds, property or materials. I will not leave my volunteer position until a replacement volunteer arrives. I will not switch assignments with another volunteer unless directed to do so by the Volunteer Coordinator. I understand that the City's Volunteer Coordinator and/or designated staff have the discretion to move or re-assign volunteers, including me, as needed.
- 5. Age for Beer and Wine Service.** I understand that only volunteers twenty-one (21) years of age and older may volunteer as beer/wine servers at City sponsored events. I understand this server age requirement and acknowledge that I must be 21 years of age to sign up as a beer/wine server. If I am less than twenty-one (21), I will inform any person who asks me to sell or serve beer or wine that I am disqualified from doing so because of my age.
- 6. Alcohol Consumption Prohibited.** I agree not to consume beer, wine, or alcoholic beverages during my shift or while wearing a volunteer event t-shirt. Any volunteer who appears to be under the influence of drugs or alcohol will be automatically turned away as a volunteer.
- 7. Confidential Information.** I understand that during my volunteer service, I may have access to, or may observe, certain information that is proprietary to the City and I hereby agree not to disclose, discuss, or reveal any such information to parties outside of the City and to keep any City records or files, confidential. I also agree to keep any information about persons or businesses that I may observe confidential and not to disclose, discuss, or reveal any such information to anyone other than those involved in my volunteer service with me. I certify that I am – and in the case of parents of guardians of minor children, my child is - in good health, has had no recent known or suspected exposure to a contagious disease, and has had no recent operation or serious illness that would interfere with his/her/my responsibilities as a City Volunteer.

8. **Insurance not Provided by City.** I understand that as a City volunteer, I do not receive from the City of Greenville any medical or workers' compensation insurance which automatically covers me for injuries or death sustained while performing volunteer services. If I believe I need – or my child needs -such insurance, then I am solely responsible for maintaining such insurance on my own.

9. **Release from Liability.** In consideration of being allowed to participate as a volunteer, I agree to release, and hold harmless the City of Greenville, including its officials, employees and agents from and against any and all losses, expenses, claims, actions, liabilities and judgments (including attorney fees through the appellate levels), which I, may sustain or suffer as a result of or arising out of my participation in the volunteer service, whether caused by the negligence, action, or inaction of the City of Greenville or persons acting on its behalf or otherwise. I also agree that I shall be fully and solely responsible for any and all loss or damage that I inflict upon any person or upon the City's and/or rented facilities during my participation in the volunteer service, and I will indemnify the City for any loss it sustains as a consequence of my negligent or reckless acts or omissions.

10. **Release as Broad as Permitted by Law.** I understand that this release is intended to be as broad and inclusive as is permitted by the laws of the State of South Carolina.

11. **Understanding Acknowledged and Age Attested.** I acknowledge that I have fully informed myself (or my child) of the contents and meaning of this Volunteer Service Agreement & Release, and I do voluntarily sign it of my own free will and as a condition of being allowed to participate with my volunteer service. Further, by signing this agreement, I attest to the fact that I am eighteen (18) years of age or older, or that the additional signature is that of my parent or guardian.

Print Name

Volunteer's Signature

Date

Address: _____

City, State, Zip: _____ Phone: _____

In case of EMERGENCY, please contact the following individual:

Print Name

Relationship

Phone

Address

**Agreement, Authorization, and Consent
for Release of Background Information**

Background criminal screens for volunteers in certain assignments may be required. Background screens are NOT required for special event volunteers at Downtown Alive, Main Street Friday's, Artisphere, Fall for Greenville, or Red, White, and Blue. Volunteers who do not agree to the background check may be refused assignment. The following information is required to process the background information. I agree, authorize and consent to the release and disclosure of any and all information:

Social Security Number: _____ Date of Birth: _____

Driver's License # _____ State Issued: _____

Volunteer's Signature Date

**Endorsement, Agreement, and Consent
of Parent or Legal Guardian
if the Volunteer is a Minor**

Parent or Guardian:

I hereby authorize the City of Greenville to take any steps necessary to ensure my name (and/or my child's name) health in case of an emergency during my volunteer service with the City. I understand that the City of Greenville is not responsible for any liability arising out of participation in their volunteer work. I also authorize the City of Greenville to use my name (and/or my child's name), photograph or image for public relations purposes related to the City of Greenville volunteer program.

Print Name

Signature of Parent or Legal Guardian Date



Exhibit C

City of Greenville Volunteer Service Application

VOLUNTEER INFORMATION		
Volunteer Position: _____	Department: _____	Date _____
Name: _____ First Middle Initial Last		
Mailing address:		
City:	State:	Zip:
Email:	Cell:	Other Number:
Date of Birth: _____ Month / Day / Year	Signature _____	
PARENT/GUARDIAN/OR LEGAL CUSTODIAN, if applicant is a minor:		
Name: _____ First Middle Initial Last		
Mailing address:		
City:	State:	Zip:
Email:	Cell:	Other Number:
<i>My child _____ has my consent to volunteer for the City of Greenville.</i>		
Signature _____		Date: _____
EMERGENCY CONTACT INFORMATION		
<i>In case of EMERGENCY, this person can be reached between the hours of 8:30 a.m. and 5:00 p.m.</i>		
Name: _____ First Last		Relationship _____
City:	State:	Zip:
Email:	Cell:	Other No.:
VOLUNTEER AVAILABILITY		
1. On what days are you available to volunteer? (Circle all that apply.) Monday Tuesday Wednesday Thursday Friday Saturday		
2. At what time of day are you available? (Please Circle) <u>8:00 a.m. to 5:00 p.m.</u> <u>8:00 a.m. to 12:00 noon</u> <u>12 noon to 5:00 p.m.</u> <u>Evening/Special Events</u>		
3. How often can you volunteer? (Please Circle) Once a week Alternating Weeks Once a month		
4. Are you available to volunteer during the school year? _____ Yes _____ No After school or weekends? _____ Yes _____ No		

GENERAL QUESTIONS

1. Identify special skills and experiences that qualifies you for this volunteer position:
2. List any formal training/certifications you have received relevant to the volunteer position you have applied for:
3. Describe any previous volunteer experience you may have in general and with the City of Greenville specifically:

Where: _____ As _____ Dates: _____

Where: _____ As _____ Dates: _____

STATEMENT OF VOLUNTEER INTEREST

Please write a brief statement as to what you expect to benefit from participation with the City's volunteer program?

MEDICAL CONDITIONS

Do you (applicant) have any medical conditions or allergies of which we need to be aware of?
___ No ___ Yes. (If yes, please explain):

ADDITIONAL APPLICATION REQUIREMENTS

1. All Volunteers must sign a Volunteer Service Agreement and Release (Exhibit D).
2. All Zoo Volunteers MUST provide the City of Greenville proof of a negative TB test given within the last year. This information is required upon application and before a background screen can be processed. TB test information needs to be updated yearly.

HOW DID YOU LEARN ABOUT OUR VOLUNTEER OPPORTUNITIES? (Check all that apply.)

City of Greenville:	___ Dept. Newsletter	___ External Volunteer	___ Friend/Family
___ Website	___ Newspaper	Organization (Specify):	___ Other: (Specify):
___ Facebook	___ Public Service	___ School (Specify):	
___ GTV	Announcement		