PPM #22
Policy Name: Volunteer Services
Effective Date: August 9, 2004
Revision Date: December 1, 2011; April 2, 2015; August 29, 2018

Authorization: [Signature]
Nancy Watkins, Undersecretary

I. PHILOSOPHY

It is the philosophy of the Office of the Lieutenant Governor (OLG) and Department of Culture, Recreation and Tourism (DCRT) to provide for citizen involvement by establishing the use of volunteer services within its Offices. Volunteers may be used to assist regular staff on an ongoing basis to provide help in interpreting the department’s role to the public.

II. APPLICABILITY

This policy is applicable to the Lieutenant Governor, Chief of Staff, Secretary, Deputy Secretary, Undersecretary, Assistant Secretaries and Deputy Assistant Secretaries.

III. POLICY

Definition: Volunteer – an individual who donates his or her time and effort to enhance the activities and programs of the agency. Volunteers may provide services in areas deemed necessary or beneficial by executive management. Volunteers may include students, senior citizens and others serving without financial remuneration.

A. Each Agency Head shall designate a staff member to serve as the agency’s Volunteer Services Coordinator. The Volunteer Services Coordinator will be the staff member who is knowledgeable about the task/project or who has the requirement for services, coordinates the effort, selects the volunteers and monitors the volunteers.

B. The Volunteer Services Coordinator shall organize the services in accordance with agency policies and procedures, determine the authority, responsibility and accountability for the volunteers. With approval from the Agency Head, the Volunteer Services Coordinator may delegate these duties to designated agency personnel. However, the responsibility for supervision and compliance remains with the Volunteer Services Coordinator.
C. The Volunteer Services Coordinator will determine and assign volunteer use of agency property and equipment, access to building/worksite and determine if any work will be done on location or off-site. If work is to be done off-site, the Volunteer Services Coordinator must obtain agreement in writing from the volunteer that the volunteer must agree to use his personal vehicle for travel to and from the alternate location and accidents or injuries sustained will be the total responsibility of the volunteer. Any injury or accident suffered by the volunteer while at the designated worksite will be covered by the agency’s general liability policy provided through the Office of Risk Management.

D. Volunteer services must be monitored and evaluated by the Volunteer Services Coordinator. Evaluations should be in writing and maintained by the Volunteer Services Coordinator for audit purposes.

E. The Volunteer Services Coordinator shall determine the length and/or duration of the use of volunteer services and the frequency of use of volunteer services. Services may be used on a short-term or long-term basis. Length and/or duration and frequency must be stated in writing and agreed upon by the volunteer and the Volunteer Services Coordinator. This agreement must be retained on file with the Volunteer Services Coordinator.

F. Use of volunteer services is not intended to replace or substitute for regular ongoing duties and/or programs that should be handled by regular classified or unclassified employees.

G. Appropriate records and documentation, including a Volunteer Registration and Agreement Form (see Attachment), shall be maintained by the agency’s Volunteer Services Coordinator. The form(s) shall include a written agreement by the volunteer to adhere to all departmental policies and procedures.

H. Volunteer Services Coordinators will provide required agency policy information to volunteers, obtain signatures for receipt of agency policies and retain on file with the Volunteer Services Coordinator for audit purposes.

I. The Agency Head (Lieutenant Governor, Chief of Staff, Secretary, Deputy Secretary, Undersecretary, Assistant Secretaries) shall be responsible for remediation or removal of a volunteer worker or volunteer organizations whenever there is a conflict with or violation of policies and procedures. The Volunteer Services Coordinator will notify the volunteer in writing of any remediation or removal.

J. Use of volunteer services is optional and at the discretion of the Agency Head.

K. Agency Heads may supplement these policies and forms to accommodate situations unique to their agencies.
IV. FORMS

A. PPM #22-Group Volunteer Registration Form
B. PPM #22-Individual Volunteer Registration and Waiver Form

Summary of Changes: Revised policy number (December 1, 2011); revised definition of volunteer, added provision for volunteer services coordinator to delegate duties to agency personnel, added provision for agency heads to supplement policies and forms, added Forms section with new Group and Individual Volunteer registration forms (April 2, 2015). Updated authorization and date, added Deputy Secretary (August 29, 2018).
Office of the Lieutenant Governor
Louisiana Department of Culture, Recreation & Tourism
Group Volunteer Registration Form

To be completed by the Volunteer Group Leader

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<tr>
<th>Name of Group or Organization (official name, include chapter or other affiliate identification)</th>
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<tr>
<th>Name of Leader</th>
<th>Name of Contact (if other than Leader)</th>
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<table>
<thead>
<tr>
<th>Email Address</th>
<th>Phone number(s) with area code</th>
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<tr>
<th>Address</th>
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To be completed by the Agency’s Volunteer Services Coordinator

Description of Services to be performed by volunteers:

Duration and frequency, including date(s) and hour(s): 

Location(s):

Describe training to be provided, if any, and/or other Agency resources that will be available to volunteers:

Completed by:                 Date:
Certification by Volunteer Group Leader

As the leader and representative of the named group or organization, I agree to serve as the liaison between the Agency, the organization, and the volunteers. I certify the following:

1. I understand and will describe to the volunteers the services they will be providing. I will explain to the volunteers that there are common risks, hazards, and dangers associated with providing the volunteer services, both foreseeable and unforeseeable. Common risks inherent in such activities may include injuries and losses resulting from weather conditions, insects, theft, trips, falls, use of the equipment and supplies, other volunteers, etc.

2. I will verify that all of the volunteers are capable of performing the services and agree to assume the risks as evidenced by their signatures (or the signatures of their parents/guardians) on the Individual Volunteer Registration and Waiver Forms, which I will obtain and submit for each volunteer prior to service.

3. Prior to arrival, I agree to submit to the Agency a volunteer roster. To the extent possible, I will provide the total number of volunteers I anticipate, their names and ages (at a minimum an indication of whether the volunteer is a minor), any special skills or limitations, and other information that will assist the Agency prepare for the volunteers’ services.

4. I understand and will explain to the volunteers that there are Agency rules, policies, and procedures that must be adhered to, instructions that must be followed, and training that must be completed in order to volunteer for the Agency and that the Agency reserves the right to remove a volunteer from service and/or from the site for any reason.

5. I understand and will explain to the volunteers that the Agency is not responsible for transportation to the work site. The organization or the individual volunteers will be required to provide any transportation.

6. I understand and will explain to the volunteers that service will be provided without payment or benefits.

7. On behalf of the organization, I am authorized to and do hereby agree to hold harmless, release, defend and indemnify the Agency from any and all claims and liability, including attorneys’ fees, that arise from the negligence of the volunteers or the organization.

<table>
<thead>
<tr>
<th>Printed Name</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

Evaluation to be completed by the Agency’s Volunteer Services Coordinator

In the event of a short-term volunteer engagement, this Evaluation shall be completed at the end of the engagement. In the event of a long-term volunteer engagement, this Evaluation shall be completed annually.

Completed by:  
Date:
PPM #22 Form B - Individual Volunteer Registration and Waiver

Office of the Lieutenant Governor
Louisiana Department of Culture, Recreation & Tourism
Individual Volunteer Registration and Waiver

Printed Name of Volunteer: ____________________________________________

Organization (if any): _______________________________________________

Address: ___________________________________________________________

Place of Employment: ___________________________ (If employed by the State of La., specify the agency.)

Date of birth: ___________________________ Minor? Yes ___ No ___

If yes, name of parent/guardian: ______________________________________

In order that we may contact you about the volunteer service (e.g., scheduling, location changes):

Email address: ___________________________ Cell number(s): ______________

Emergency Contact(s):

Name: ___________________________ Relation: ___________________________ Contact #(s): ___________________________

List any Special Skills or Certifications:

________________________________________________________________________

List any limitations so that the Agency may prepare and modify the training and assignments accordingly:

________________________________________________________________________

Have you ever been convicted of a felony? Yes ___ No ___
Have you ever been convicted of a sex crime? Yes ___ No ___
If yes to either, please explain (e.g., offense, date, ongoing restrictions, parole):

________________________________________________________________________

As a volunteer for the Agency, I hereby agree to abide by all policies, procedures, rules, regulations, and instructions in the conduct of my activity. I will serve at the discretion of the staff member under whose supervision I am assigned. I will serve without pay or benefits. I agree to attend orientation and/or training prior to service. I understand that any falsification of the above information or failure to comply with the policies, procedures, rules, regulations or instructions may result in my termination as a volunteer. I also understand that my services may be terminated at any time for no reason. I understand that there are common risks, hazards, and dangers associated with volunteer services, including foreseeable and unforeseeable risks such as injuries resulting from use of the equipment and supplies, other volunteers, weather conditions, insects, trips, falls, and other dangers inherent in such activities. I will not participate in the activities unless I am able to do so (e.g., physically, legally, properly trained). I hereby assume and accept all risks. I agree to hold harmless, release, defend and indemnify the Agency from any and all claims and liability, including attorneys’ fees, other than those resulting from the Agency’s negligence. I agree that the Agency is not responsible for transportation to the work site and that I cannot drive Agency vehicles. I grant permission to the Agency to use my name or likeness in any media in perpetuity for public purposes consistent with the Agency’s mission.

X ___________________________ Signature of Volunteer (if 18 or older) Date ___________________________

X ___________________________ Signature of Parent/Guardian Date ___________________________
Description of Services
To be completed by the Agency’s Volunteer Services Coordinator. If the volunteer is a member of a registered group, the PPM #22 Form A – Group Registration Form may be used.

Description of Services to be performed:

Duration and frequency, including date(s) and hour(s):

Location(s):

Describe training to be provided, if any, and/or other agency resources that will be available to volunteer:

Completed by:  
Date:

Evaluation of Services
To be completed by the Agency’s Volunteer Services Coordinator
In the event of a short-term volunteer engagement, this Evaluation shall be completed at the end of the engagement. In the event of a long-term volunteer engagement, this Evaluation shall be completed annually. If the volunteer is a member of a registered group, a single evaluation of the group services may be used.

Completed by:  
Date: