## MEMORANDUM OF UNDERSTANDING

## **BETWEEN**

## SENIOR SERVICES OF SOUTHEASTERN VIRGINIA

Retired and Senior Volunteer Program
Interstate Corporate Center
6350 Center Drive, Building 5, Suite 101, Norfolk, Virginia 23502
(757) 461-9481

and

Volunteer Station		BHN
Address		
Telephone	FAX	E-Mail:
It is agreed that the attached Bas that:	ic Provisions will guid	de our working relationship and
The RSVP representative volunteer Station is <b>Bob J</b> Telephone number <b>625-5</b> 8	arrell	
The volunteer station repreased who will be responsible		
Telephone		hone Number
(Title)		
The Memorandum of Understand with concurrence of both parties. changes.	<b>.</b> , ,	e amended, in writing at any time very three years to permit needed
(For RSVP)	(	(For the Volunteer Station)
Signature: Title:Volunteer Director Date:	Title:	e:
Signature: Title: _ <u>Volunteer Coordinator</u> Date:	Title:	e:

#### BASIC PROVISIONS OF MEMORANDUM OF UNDERSTANDING

### 1. The Retired and Senior Volunteer Program will:

- 1. Recruit, interview, and enroll RSVP Volunteers and refer volunteers to the volunteer station.
- 2. Provide orientation to volunteer station staff prior to placement of volunteers, and at other times, as need arises.
- 3. Refer volunteers to volunteer station for assignments, and review acceptability of volunteer assignments.
- 4. Furnish accident, personal liability, and excess automobile liability insurance coverage as required by program policy.
- 5. In cooperation with the Volunteer Advisory Council, arrange for an appeals procedure to address problems arising between the volunteer, the volunteer station, and/or RSVP.
- 6. Provide or arrange with volunteer station for transportation, if available, for volunteers to and from their assignments.
- 7. Arrange with volunteer station for meals, when possible, for volunteers on assignments.
- 8. Monitor volunteer activities at volunteer station periodically to assess and/or discuss needs of volunteers and volunteer station.

## 2. The Volunteer Station will:

- 1. Make final decision on assignment of volunteers.
- 2. Implement orientation, in-service instruction or special training of volunteers.
- 3. Furnish volunteers with any materials, or transportation required for assignments.
- 4. Provide for adequate safety of volunteers.
- Collect and validate appropriate volunteer reports for submission to RSVP. (Station Time Sheets)
- 6. Validate monthly volunteer reports submitted by volunteers to verify hours of volunteer service. (Volunteer Time Sheets)

## B. The Volunteer Station will (Continued):

- 7. Investigate and report accidents and injuries involving volunteers to RSVP.
- 8. Discuss assignments with individual volunteers referred by RSVP and provide written assignments to volunteers, with a copy to RSVP.
- 9. Provide supervision of volunteers on assignments.
- 10. Provide public liability and automobile liability insurance, as appropriate.
- 11. Supply financial vouchers to RSVP to verify non-federal support when lunches or transportation have been provided to volunteers. (In-Kind Vouchers)

12.	In-Kind Contributions: Value per meal:		
	Value per snack	per volunteer.	Any recognition
	event honoring the volunteer(s) may be donated as an In-Kind Contribution		
	Value to be determined for each special event by the volunteer station.		

## 3. Other Provisions

# 1. <u>Separation from Volunteer Service</u>

The volunteer station may request the removal of a senior volunteer at any time. The RSVP Volunteer may withdraw from service at the volunteer station or from the Retired Senior Volunteer Program at any time. Discussion of individual separations will occur between RSVP staff, volunteer station staff and the volunteer to clarify the reasons, resolve conflicts, or take remedial action, including placement with another volunteer station.

## 2. Letters of Agreement

When in-home assignments of volunteers are made, a signed letter of agreement will be signed by the parties involved. The document will authorize volunteer service in the home, and identify specific volunteer activities, period and conditions of service.

#### 3. Assignment Specifications

There is a need for	volunteer(s) to provide volunteer service in the
following areas:	

Please attach available job descriptions.

## HANDICAPPED ACCESSIBILITY SELF-EVALUATION CERTIFICATION

Organization Name:		
Address:		
Telephone Number (wit	n Area Code):	
I certify that a handica	accessibility self-evaluation has been:	
Completed on _		
Partially comp	eted and will be done on(date)	
The results of the self-	evaluation(s) is (are) as follows:	
	ient's program, when viewed in its entirety, is accessible and no actions are required.	
·	ient's program, when viewed in its entirety, is accessible, but some actions will be made.	
	ient's program, when viewed in its entirety, is not accessible. FOR R ONLY: Corrective action will be made by(date)	
self-evaluation was cor	e organization has 15 or more employees, information on how the ducted is to be made available for public inspection for 3 years afte inderstand that this information will be available to ACTION officials	
(date)	(signature)	
	(name/title of responsible official)	

Each OAVP station and VISTA site must submit this certification form to its OAVP sponsor or VISTA project. Each OAVP sponsor and VISTA project must submit this one form to the Corporation for National and Community Service.