

COLUMBUS STATE UNIVERSITY

Policy Name:	Volunteer Policy
Policy Owner:	Vice President, Business and Finance
Responsible University Office:	Office of Human Resources
Approval Date	TBD
Effective Date:	TBD
Revisions:	None
Policy Number:	TBD
Related Policies:	Board of Regents Policy 6.9 Programs Serving Minors; CSU's Protection of Minors on Campus

I. PURPOSE OF POLICY

To establish guidelines and procedures for individuals who seek to volunteer at Columbus State University.

II. SCOPE OF POLICY

This Policy applies to all individuals not employed by the University who seek, or intend to seek, to volunteer on the University's behalf.

III. DEFINITIONS

1. **CSU Sponsored Activity** – a structured activity organized and approved by a CSU department or organization.
2. **Volunteer** - An individual not employed by the University and who performs services on behalf of the University for civic, charitable, educational or humanitarian reasons, without promise or expectation or receipt of compensation.
3. **Minor** – any individual under the age of 18 years.

IV. POLICY GUIDELINES

1. University volunteers are expected to abide by all University policies, procedures and regulations, including but not limited to, those relating to ethical behavior, safety,

confidentiality, protected health and student information, computer use, financial responsibility, and alcohol/drug use. The volunteer will be subject to all such policies during the provision of volunteer services whether on or off CSU campuses.

2. An individual must be at least 16 years of age to volunteer at CSU. Individuals under the age of 18 years must have parental/guardian consent to serve as a volunteer.
3. Volunteers are prohibited from engaging in activities deemed high risk by the University. See Section VII for a non-exclusive listing of prohibited activities the University has deemed as high risk.
4. All volunteer work must be directed and supervised by a University employee designated by the unit for which the individual will be working (“Sponsoring Department”). As part of their required training, volunteers must agree to abide by all applicable University policies prior to performing volunteer service. Each application to volunteer must be approved by the head of the sponsoring department, division head, or designee.
5. Volunteers do not have an employment relationship with the University on any grounds or for any reason. Volunteers are not eligible for University benefits, including but not limited to workers’ compensation, and the University does not provide Volunteers with accident or medical insurance. The University does not provide comprehensive or collision insurance for a Volunteer’s personal vehicle.

V. VOLUNTEER SERVICES REQUIRING BACKGROUND CHECK

1. Volunteer activities with minors;
2. Volunteer activities by an individual not employed or enrolled as a student who will regularly interact with CSU employees or students; and
3. Volunteer activities which will require access to confidential information.

VI. VOLUNTEERS IN DIRECT CONTACT WITH MINORS

Volunteers in direct contact with minors shall be required to undergo the Minors on Campus training pursuant to the Minors on Campus Policy.

VII. PROHIBITED ACTIVITIES

Individuals volunteering their services on behalf of CSU are prohibited from engaging in the following activities:

1. Operate heavy equipment;
2. Work with hazardous materials or select agents;

3. Work with stored energy (e.g., physical energy stored in air, gas, steam, water pressure, or in springs, elevated machines, rotating flywheels, fans, hydraulic systems, etc.);
4. Conduct any activity considered inappropriate for an employee;
5. Drive CSU vehicles without express consent by Office of Risk Management; and
6. Enter into any contract on behalf of the University.

VIII. LIABILITY COVERAGE FOR VOLUNTEERS

The University is self-insured through the Department of Administrative Services Risk Management Services against state tort claims. This coverage is extended to Volunteers who are volunteers in programs organized, controlled and directed by CSU for the purposes of carrying out the functions of CSU. The liability coverage is for injuries and/or property damage Volunteers may cause others while acting in the course of their official volunteer duties. Liability coverage does not apply when Volunteers deviate from the course of their volunteer duties.

IX. PROCEDURES TO IMPLEMENT POLICY

1. Individual desiring to serve as a volunteer must submit CSU-approved Volunteer Application ([see Appendix to this Policy](#)) to the Sponsoring Department prior to engaging in volunteer activity.
2. The head of the sponsoring department, division head, or designee, must approve application before applicant is authorized to engage in volunteer activities.
3. A volunteer may serve no longer than one year without renewal. All forms & processes above must be renewed annually for current volunteers who will serve in the same capacity on a long-term basis. If the duties or service area of a current volunteer changes within the year, all applicable forms and processes must be completed once again.
4. A University volunteer's service may be terminated at any time and without notice.
5. Sponsoring Department must provide basic training for Volunteers on CSU policies in collaboration with the Office of Human Resources.
6. Questions concerning the Volunteer Policy should be directed to the Office of Human Resources at (706) 507-8920 or via email at HR@columbusstate.edu.

COLUMBUS STATE UNIVERSITY
VOLUNTEER APPLICATION and AGREEMENT

Volunteer's Name (Please Print): _____ Social Security No: _____

Email: _____ Contact Phone No. _____ Home Phone No. _____

Mailing Address: _____ Date of Birth: _____

If under the age of 18, Name of Parent or Guardian _____ Tel. No. _____

Emergency Contact Name: _____ Emergency Contact Tel. No. _____

Briefly describe activities you are volunteering for: _____

When do you anticipate volunteer activities will end? _____

Name and department of activity's supervisor: _____

List any pertinent certifications you possess that may be applicable to volunteer activities: _____

Will you be at least 18 years old at the time of volunteer activities? Yes No
Will the activity you are volunteering for require direct interaction with minors, i.e., under the age of 18? Yes No
Have you ever been convicted of a crime or misdemeanor? Yes No
If "Yes," please provide additional information below:

PLEASE READ CAREFULLY

I certify that the information provided on this Volunteer Application is true and accurate and any misrepresentation provided on this form may result in the denial and/or immediate termination as a volunteer. If selected as a Volunteer, I will comply with all the terms set forth below, the requirements specified by my supervisor and acknowledge that the university may at its discretion terminate my participation in providing volunteer services at any time.

I understand that if I am under the age of 18, a parent or guardian must agree to the terms of this Volunteer Application

TERMS OF AGREEMENT

1. I agree that my participation in the activities outlined above is not in exchange for any consideration (e.g., pay, benefits, promise of future employment). I acknowledge that, in exchange for my service as a volunteer, I have not been promised anything consideration, and have no expectation of receiving any consideration whatsoever.
2. I agree that, as a volunteer, I will not be acting as a CSU employee or student. I understand and agree that CSU and I both have the right to end this volunteer relationship at any time, for any reason, and without advance notice.
3. I agree to cooperate with any screening and background checks required by the University prior to my performance of any Volunteer Duties.
4. I understand that CSU is self-insured through the Department of Administrative Services against state tort claims and that this coverage is provided for volunteers in programs organized, controlled and directed by CSU for the purposes of carrying out University functions. ***I UNDERSTAND THAT COVERAGE DOES NOT APPLY WHEN I DEVIATE FROM THE COURSE OF MY VOLUNTEER DUTIES.***
5. I understand that as a volunteer I will not be entitled to any employee benefits. I understand that CSU will not provide me with accident or medical insurance and is therefore, not responsible for any accident or medical expenses I incur in the course of volunteering. I also understand that I am not covered by workers' compensation laws in connection with my Volunteer Duties and that it is in my best interest to obtain my own medical insurance before participating in my Volunteer Duties. I understand that if I utilize my personal vehicle, CSU does not provide comprehensive or collision insurance for my personal vehicle.

6. I agree not to disclose any confidential information concerning research subjects, unpublished research data, and other confidential information of which I may learn in the course of my Volunteer Duties. I acknowledge and agree that any intellectual property I create in the course of my activities as a volunteer shall be the property of the CSU.
7. My performance of the Volunteer Duties is purely voluntary and I agree to assume all risk associated therewith. I do hereby release, waive, discharge and covenant not to sue Columbus State University and the Board of Regents of the University System of Georgia and their employees, officers, members and agents (collectively, "CSU et al") from all liability, loss, damage, or claim resulting from my negligence, recklessness, or intentionally wrongful conduct in the performance of my Volunteer Duties. I also agree to indemnify and hold CSU et al harmless from all claims, demands, causes of action, actions, judgments or other liability including reasonable attorneys' fees arising out of, resulting from or in connection with my negligent, grossly negligent, reckless, or intentionally wrongful conduct in the performance of my duties as a Volunteer or that arise as a result of my status as a Volunteer.

By submitting this form, I, _____, attest and affirm that the information provided on the Volunteer Application is true and accurate.

Volunteer:

Signature

Date

Head of Sponsoring Department

Date

Department/Division Head, or
Designee

Date

If you have questions regarding the volunteer form or need additional information, please reach out to the following offices:

- Office of Human Resources – 706.507.8920 / hr@columbusstate.edu