



FiftyForward RSVP

Lead with Experience

**Memorandum of Understanding
Between
FiftyForward RSVP
And**

Organization Name: _____

Address: _____

Telephone: _____ **Fax:** _____

Contact Person: _____

E-Mail: _____ **Website:** _____

It is agreed that the basic policies of this Memorandum of Understanding (MOU) will guide the working relationship between RSVP and the volunteer station. The standard length of an MOU through RSVP is three years. However, conditions of this Memorandum of Understanding may be amended or terminated in writing at any time at the request of either party. The date an organizational contact signs the agreement is the start date of the MOU. The MOU must be renewed at least every three years to permit needed changes.

A. FiftyForward RSVP will:

1. Enhance recruitment efforts of adults 55 and older for _____ (also referred to as the “**station**”) by promoting the station through RSVP activities and marketing materials.
2. Interview and refer adults age 55+ to the station for volunteer service.
3. Review the station’s volunteer assignments for appropriateness for the individual volunteers.
4. Furnish accident, public liability, and excess automobile insurance coverage as required by the program. Insurance is secondary coverage and is not primary insurance.
5. Provide limited mileage reimbursement to volunteers if project funds are available.
6. Monitor program activities at the volunteer placement to assess needs of the station and the volunteers.
7. Provide a four-touch volunteer contact annually through phone, mail, newsletter, cards, and/or recognition.



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8. Provide RSVP orientation to volunteer station staff prior to placement of volunteers and at other times, as the need arises.
9. Orient and instruct RSVP volunteers on program procedures and policies.
10. Conduct assessments to evaluate satisfaction and impact of RSVP and its volunteers.

B. The Volunteer Station will:

1. Designate the following staff member to serve as liaison to the RSVP program.

- | Name | Title |
|------|-------|
|------|-------|
2. Request volunteers for assignment through service descriptions and review assignments annually to determine need.
 3. Interview and make final decision on assignment of volunteers. Conduct background checks, if deemed necessary. If unable to determine an assignment advise RSVP, so the volunteer can be referred to another agency.
 4. Not discriminate against RSVP volunteers or in the operation of its program on the basis of race; color; national origin, including individuals with limited English proficiency; sex; age; political affiliation; religion; or on the basis of disability, if the participant or member is a qualified individual with a disability;
 5. Provide orientation, training, and on-going supervision for the volunteers.
 6. Assume adequate health and safety provisions for the protection of the volunteers through training and orientation.
 7. Investigate and report any accidents and injuries involving RSVP volunteers immediately to the RSVP office. All reports should be submitted in writing.
 8. Furnish volunteers with materials required for an assignment (i.e., uniform, supplies).
 9. **Submission of Hours:**
 - 1) **Community-Based Programs:** Encourage volunteers to submit hours to the RSVP office by the 10th of each month. Volunteers will receive a monthly reminder from the RSVP Office via email.
 - 2) **One time events and FiftyForward Centers/ Programs:** Report the volunteer hours to the RSVP office by the 10th of each month. Agency representative will receive a monthly reminder from the RSVP Office via email.
 10. Respond to RSVP's annual station survey, which requests an impact statement of the services provided to station customers and the number of customers served by the RSVP volunteers.



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11. Acknowledge RSVP volunteers. May include invitation to volunteer appreciation events, thank you notes, promotion to volunteer leadership, verbal praise, etc.

C. Other Provisions

1. *Separation from Volunteer Service:* The volunteer station may request the removal of an RSVP volunteer at any time. The RSVP volunteer may withdraw from service at the Volunteer Station or from RSVP at any time. Discussion of individual separations will occur among RSVP staff, Volunteer Station staff, and the volunteer to clarify the reasons, resolve conflicts, or take remedial action.
2. *Religious Activities:* The Volunteer Station will not request or assign RSVP volunteers to conduct or engage in religious, sectarian, or political activities.
3. *Displacement of Employees:* The Volunteer Station will not assign RSVP volunteers to any assignment that would displace employed workers or impair existing contracts for services.
4. *Termination Policy:* Upon the termination of the MOU, RSVP reserves the right to notify RSVP volunteers of the dissolution of the agreed partnership. RSVP volunteers will then be encouraged to participate in volunteer activities at another partner agency.
5. *Accessibility and Reasonable Accommodation:* The Volunteer Station will maintain the programs and activities to which RSVP volunteers are assigned accessible to persons with disabilities (including mobility, hearing, vision, mental, and cognitive impairments or addictions and diseases) and/or limited English language proficiency and provide reasonable accommodation to allow persons with disabilities to participate in programs and activities
6. *Electoral Activities:* Volunteers will not be used for electoral activities, voter registration, voter transportation to polls or in efforts to influence legislation.
7. *Labor Activities:* Volunteers are not used to support labor or anti-labor organizations or related activity.
8. *Compensation:* Stations are not to request compensation from the beneficiaries of Senior Corps volunteers nor is financial support of the RSVP project a precondition for volunteer service. RSVP volunteers are not to receive a fee for service from service recipients, their guardian, family or friends.
9. By signing this Memorandum of Understanding, the Volunteer Site/Station Representative certifies that the volunteer station is a public or nonprofit organization, or a proprietary health care agency.

Authorized Signature of the Volunteer Station: _____

Title: _____ **Date:** _____

Signature of RSVP staff: _____



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Please select your station (agency) type:

- | | |
|---|---|
| <input type="checkbox"/> Adult Corrections | <input type="checkbox"/> Other Educational (please specify) |
| <input type="checkbox"/> Adult Day Care | _____ |
| <input type="checkbox"/> Animal Welfare | <input type="checkbox"/> Other Environmental(please specify) |
| <input type="checkbox"/> Area Agency on Aging | _____ |
| <input type="checkbox"/> Before and After School Care | <input type="checkbox"/> Other Health Care(please specify) |
| <input type="checkbox"/> Chamber of Commerce | _____ |
| <input type="checkbox"/> Charity | <input type="checkbox"/> Other Public Safety(please specify) |
| <input type="checkbox"/> Clinic (non-residential) | _____ |
| <input type="checkbox"/> Community Development of Non-Profits | <input type="checkbox"/> Other Social Service(please specify) |
| <input type="checkbox"/> Community-Based Environmental | _____ |
| <input type="checkbox"/> Congregate Meals/Meals on Wheels | <input type="checkbox"/> Park/Recreational |
| <input type="checkbox"/> Court | <input type="checkbox"/> Police/Law Enforcement |
| <input type="checkbox"/> Day Care (pre-elementary) | <input type="checkbox"/> Post-Secondary Institution |
| <input type="checkbox"/> Developmental Disability (non-residential) | <input type="checkbox"/> Public Congregate Housing |
| <input type="checkbox"/> Food Bank/Food Gleaning | <input type="checkbox"/> Public/Private Elementary School |
| <input type="checkbox"/> Head Start | <input type="checkbox"/> Public/Private Second School |
| <input type="checkbox"/> Home Health Care | <input type="checkbox"/> Rehabilitation Center
(excluding sheltered workshops) |
| <input type="checkbox"/> Hospice | <input type="checkbox"/> Residential Long-Term Care |
| <input type="checkbox"/> Hospice | <input type="checkbox"/> Service Organization (Lions, Elks, etc) |
| <input type="checkbox"/> Hospital/Medical Center | <input type="checkbox"/> Sheltered Workshop/Center
(vocationally focused) |
| <input type="checkbox"/> Juvenile Correctional | <input type="checkbox"/> Teen Pregnancy/Teen Parenting |
| <input type="checkbox"/> Library | <input type="checkbox"/> Thrift Shop/Co-op |
| <input type="checkbox"/> Mental Health (non-residential) | <input type="checkbox"/> Transitional Shelter/Center |
| <input type="checkbox"/> Multi-Purpose/Senior Center | <input type="checkbox"/> Umbrella Environmental |
| <input type="checkbox"/> Museum | <input type="checkbox"/> Veterans Hospital |
| <input type="checkbox"/> Native American School | <input type="checkbox"/> Vocational Center |
| <input type="checkbox"/> Non-Head Start Educational Pre-School | |
| <input type="checkbox"/> Nursing Home/Convalescent Center | |