Volunteer Terms and Conditions:

Volunteer Acknowledgement:
In accordance with the volunteer and intern agreements at Catholic Charities of Central and Northern Missouri (CCCNMO) I consent to provide and submit the information necessary for the completion of a criminal background check. I understand that a criminal background check that reveals a concerning history, in the discretion of CCCNMO, will impact my ability to serve with CCCNMO. I consent to having my background check performed on a continuous basis during the time I am considered to be a volunteer of CCCNMO.

I agree to familiarize myself with the Volunteer Handbook for Catholic Charities of Central and Northern Missouri and will adhere to the policies and practices outlined in the handbook. I also acknowledge and agree that the Handbook, policies, and practices are not to be constructed as an employment contract between me and any agencies affiliated with CCCNMO. Any service as a volunteer is greatly appreciated but also subject to being discontinued or terminated at the discretion of either party. I understand that CCCNMO reserves the right to suspend or terminate my service at any time. I acknowledge that CCCNMO has reserved the right to change, withdraw, and add to the policies and practices as it deems necessary, as set forth in the handbook. I understand that before I begin my service assignment with CCCNMO I may be asked to complete a general agency orientation and/or program specific training that reflects the responsibilities of my service assignment.

I agree to support CCCNMO’s culture of compliance with applicable privacy laws and to advocate for and protect patient privacy. I agree to not access or disclose any confidential information I learn or am exposed to as part of my volunteer duties. I will seek minimum amount of confidential information necessary to carry out my volunteer duties. I agree to not post client information on social media and agree not to share protected patient information by email, phone, or text. I understand that photos of clients, their families, or of staff are not permitted, without their expressed written permission on approved CCCNMO forms. I understand that my obligation to maintain confidentiality of information obtained from CCCNMO extends beyond the length of my volunteer service to CCCNMO. I agree to maintain confidentiality of such information as long as it is known to me. I understand that I may not remove any hardcopy and/or electronic files of information from the premises. I understand that verbal disclosures may also be viewed as a privacy violation, and subject to fines or termination. Moreover, I acknowledge and understand that any breach of confidentiality, client or otherwise, resulting from my written or verbal release of health information or records provides grounds for disciplinary action, which may include my immediate termination as a volunteer with CCCNMO.

I agree to respect differences in cultural practices and educate myself about cultural differences when necessary. In keeping with the mission of CCCNMO, I agree to offer service to those in need regardless of background, belief, or circumstance.

I agree to comply with CCCNMO’s requirement to track volunteer hours (determined by grant funding and private donations).

Conflict of Interest Statement for Key Volunteers:
Any duality of interest or possible conflict of interest on the part of any member of the Board of Directors should be disclosed to the other members of the Board of Directors and made a matter of record in the minutes of the meeting. Any Director having a duality of interest or possible conflict of interest on any matter shall not vote or use personal influence on the matter shall not be counted in determining the quorum for the meeting and shall not be present in the room when the Board of Directors votes on the matter. The minutes of the meeting should accurately reflect that a complete disclosure was made, the abstention from voting, the non-presence in the room when the vote was taken, and the quorum situation.
The foregoing requirements shall not be construed as preventing the Director from briefly stating his or her position in the matter, or from answering pertinent questions that may be directed toward that person by other Board members concerning the matter. Any matter of question or interpretation that arises relating to this policy should be referred to the Bishop for decision and/or referral to the Board of Directors for decision, where appropriate.

**Whistleblower Policy:**
This Whistleblower Policy (1) encourages staff and volunteers to come forward with credible information on illegal practices or serious violations of adopted policies of the Organization; (2) specifies that the Organization will protect the person from retaliation; and (3) identifies where such information can be reported. A whistleblower as defined by this policy is an employee or volunteer of Catholic Charities of Central and Northern Missouri who reports an activity that he/she considers to be illegal or dishonest to one or more of the parties specified in this Policy. The whistleblower is not responsible for investigating the activity or for determining fault or corrective measures; appropriate management officials are charged with these responsibilities. Examples of illegal or dishonest activities are violations of federal, state, or local laws; billing for pledges not made or for services not delivered; and other fraudulent financial reporting. If an employee or volunteer has knowledge of or a concern of illegal or dishonest fraudulent activity, the employee or volunteer must contact the Executive Director. Should the issue involve the Executive Director, the employee or volunteer must contact the President of the Board of Directors asking for a review of said activities by the officers of the Board. Sound judgment must be exercised to avoid baseless allegations. An employee or volunteer who intentionally files a false report of wrongdoing will be subject to discipline up to and including termination.

Whistleblower protections are provided in two important areas -- confidentiality and against retaliation. To the greatest extent possible, confidentiality of the whistleblower will be maintained. However, identity may have to be disclosed to conduct a thorough investigation, to comply with the law and to provide accused individuals their legal rights of defense. Catholic Charities of Central and Northern Missouri will not retaliate against a whistleblower. This includes, but is not limited to, protection from retaliation in the form of an adverse action such as termination, compensation decreases, or poor work assignments and threats of physical harm. Any whistleblower who believes he/she is being retaliated against must contact the Executive Director immediately. The right of a whistleblower for protection against retaliation does not include immunity for any personal wrongdoing that is alleged and investigated. All reports of illegal and dishonest activities will be promptly submitted to the Executive Director who is responsible for investigating and coordinating corrective action. Employees with any questions regarding this policy should contact the Executive Director.

**Statement of Confidentiality:**
Catholic Charities of Central and Northern Missouri (CCCNMO) routinely handles highly confidential information and financial data. Additionally, other confidential information about CCCNMO’s business practices or any other sensitive matter may be made or become known to a volunteer. CCCNMO requires that all personal information gained about clients through service with our organization be treated confidentially. A breach of confidentiality is a serious violation of trust and ethical responsibility. Information should be shared only with staff of CCCNMO. If a client confides potentially harmful information (such as illegal activities, abuse, or suicide), you need to remind the client that you can and do share information with CCCNMO staff as necessary. My signature indicates that I have read and agree to keep in strict confidence information concerning Catholic Charities of Central and Northern Missouri and clients of CCCNMO that I may have access to during my tenure. I agree not to disclose such information to anyone not having a business need to know this information. Furthermore, I agree to be discreet regarding matters being handled by CCCNMO.

**Liability Waiver:**
I acknowledge that my participation in the Program is voluntary and at my own risk. I affirm that I am physically fit and able to offer volunteer services at any Catholic Charities of Central and Northern Missouri (CCCNMOM) facility. I understand that as a volunteer, I am not covered by CCCMOM under any type of workers compensation program should I be injured by my participation in the Program. I certify that I will not create or contribute to an unsafe condition nor use any tool or engage in any task in which I do not have experience or training. I agree to abide by all applicable federal, state, and local laws, as well as the rules and directions of the Program Manager at the facility or the program where I am assigned a volunteer role. I further agree on behalf of myself, my heirs, assigns, executors, and personal representatives, to release Catholic Charities of Central and Northern Missouri, the Diocese of Jefferson City, and their officers, directors, agents, employees, volunteers, or other representatives, from and against any and all claims, including but not limited to injuries, liabilities, losses or damages, arising from or in any way connected with participation in the Program.

**Driving Policy:**
Compliance with the CCCMOM Driving Policy is required for all adult (18 years or older) volunteers. Adults seeking to participate in any volunteer activity involving transportation of clients and/or transportation of goods, by agency or personal vehicle, will comply with the CCCMOM Driving Policy Agreement for Agency Vehicles and/or the CCCMOM Driving Policy Agreement for Personal Vehicles and will provide the required documentation. Those who do not wish to transport clients or goods, or who will remain a remote volunteer throughout the duration of their volunteer period, will decline the CCCMOM Driving Policy. Even if a volunteer agrees to comply with the CCCMOM Driving Policy, driving privileges are subject to being revoked at any time for any reason, in the sole discretion of CCCMOM.

**CCCNMOM Driving Policy Agreement for Agency Vehicles:**
As a volunteer with CCCMOM who will be driving a CCCMOM vehicle, I agree to the following:
1. I possess a valid, non-probationary driver’s license and have provided a copy of my license to CCCMOM.
2. I am aware of no physical disability that may impair my ability to drive safely.
3. I agree to abide by and comply with all applicable laws and ordinances, including speed limits, when driving a CCCMOM vehicle.
4. I will comply with all CCCMOM policies and acknowledge that these policies have been furnished to me.
5. Every person I am transporting in the CCCMOM vehicle will wear a seat belt.
6. I will comply with all Safe Environment policies of the Diocese of Jefferson City, if I am transporting minors or vulnerable adults.
7. I understand that I must be at least 18 years of age to drive a CCCMOM vehicle.
8. Before operating a CCCMOM vehicle, I will check to make sure no dashboard lights are on that indicate the car needs to be serviced. If such lights are on, I will notify CCCMOM staff and will not drive the vehicle.
9. I will notify the CCCMOM office manager if any service lights are on upon my return of the vehicle or if the vehicle is low on gas.
10. I understand that the CCCMOM vehicle is insured through CCCMOM.

**CCC NMOM Driving Policy Agreement for Personal Vehicles:**
As a volunteer with CCCMOM driving my personal vehicle for volunteer duties, I agree to the following:
1. I possess a valid, non-probationary driver’s license and have provided a copy of my license to CCCMOM.
2. My personal vehicle used for volunteer services has a valid registration and meets state safety requirements.
3. My personal vehicle is insured for minimum limits of $200,000 per person, $500,000 per occurrence and I have provided a copy of my insurance information to CCCNMO.
4. I am aware of no physical disability that may impair my ability to drive safely.
5. I agree to abide by and comply with all applicable laws and ordinances, including speed limits, when driving a CCCNMO vehicle.
6. I will comply with all CCCNMO policies and acknowledge that these policies have been furnished to me.
7. Every person I am transporting in the CCCNMO vehicle will wear a seat belt.
8. I will comply with all Safe Environment policies of the Diocese of Jefferson City, if I am transporting minors or vulnerable adults.
9. I understand that I must be at least 18 years of age to volunteer to transport clients/goods of CCCNMO.
10. I understand that my personal insurance will be primary in the event of an accident or claim associated with my transportation volunteer service.
11. I may be eligible for mileage reimbursement, according to CCCNMO policy.

**Media Authorization for Volunteers and Employees:**
Participants are advised that photographs or videos of participants may be used in publications, websites or other materials produced from time-to-time by Catholic Charities of Central and Northern Missouri (CCCNMO) and the Diocese of Jefferson City. Participants shall not be identified by name, however, without specific consent. Please note that CCCNMO has no control over the use of photographs or videos taken by third party media outlets that may be covering the event in which you participate.

I hereby expressly assign to CCCNMO, and to all its agents all the rights, title and interest in, and to all photos/videos(recordings made by CCCNMO or the Diocese of Jefferson City of me, in perpetuity. I hereby authorize the reproduction, sale, lease, copyright, exhibition, broadcast and/or any distribution of said photos/videos(recordings without limitation for any purpose whatsoever; and I further waive all rights to any compensation for my appearance or participation in the photos/videos(recordings.