

VOLUNTEER SERVICE AGREEMENT

(Must be signed by Volunteer and Supervisor)

Name: Start Date:	
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- I agree to perform volunteer services as described for the California State Library (CSL). I understand that I will begin service on a reciprocal trial basis. I agree to participate in orientation and training. I am authorizing the State Library to contact my references.
- I understand my volunteer schedule and realize the library is depending on my services. If, for a serious reason I cannot keep my commitments, I will notify my Staff Volunteer Contact and/or supervisor in advance.
- I agree and understand that any work I perform within the scope of this agreement will be provided on a voluntary basis and that I do not expect payment or other compensation for performing such work. I also understand that a volunteer position does not constitute an employee-employer relationship with CSL and that I serve at the discretion of CSL or designee.
- I agree not to divulge any information regarding persons who are receiving services or other assistance from CSL or otherwise involved in my volunteer services. I recognize that unauthorized release of confidential information may make me a subject to a criminal action.
- I understand that I am fully responsible for maintaining my own personal records of time volunteered to CSL for the purposes of internships, community service, etc, subject to my supervisor's verification. At the end of my volunteer service I can have my supervisor sign a letter documenting hours donated, and I understand that CSL will maintain no permanent record of this time. I understand that I will be required to sign in and out.
- I understand that I am covered under the CSL Workers' Compensation insurance in the event of an injury from rendering a volunteer service. I will report any injury or incident to my supervisor immediately.
- I understand that the CSL has a zero-tolerance policy against any type of violence, threat or intimidation, implied or actual in the workplace. I agree to comply with this policy, and recognize that I will also be protected by it.
- I understand that CSL has a zero-tolerance policy against any use of, or being under the influence of, illegal drugs or alcohol in the workplace. I agree to comply with this policy.
- I understand that CSL has a policy against harassment in the workplace which includes verbal, physical, visual and sexual harassment. I agree to comply with this policy.
- I understand that CSL is not responsible for loss or damage to personal belongings.
- I understand and agree that all rights, title and interest, including copyright, in and to any materials created by me as a volunteer during the term of this agreement shall belong to CSL upon creation and shall continue in the CSL's exclusive ownership upon termination of this agreement. Such materials shall be a work for hire within the meaning of the Copyright Act of 1976, as amended. If and to the extent that any portion of the materials created by me pursuant to

this agreement are determined not to be a work for hire, I assign to CSL all rights, title and interest in such portion of the materials, including all related copyrights and other proprietary rights. I agree that the provisions of this paragraph shall be effective unless otherwise agreed to in writing. I agree to cooperate with CSL and to execute any document reasonably necessary to given these provisions full force and effect, even if this agreement has been terminated.

• I understand that this agreement remains in effect only so long as it is mutually agreeable to both CSL and me, and that either I or CSL may terminate this agreement at any time, with or without cause, and with or without advance notice.

I commit to the following days and/or nours provided below:			
Days available: M TW Th F			
Times available: Mornings Afternoons Evenings			
Length of Assignment Desired: 3 months 6-12 months 6-12 months			
Special Projects On-call Over a year			
Volunteer Approval: I hereby volunteer to perform attached and to the time commitment that I have pro-			
Volunteer Signature:	Date:		
Section Supervisor Signature:	Date:		
Location of Volunteer Assignment:	Start Date:		
Volunteer Coordinator Signature:	Date:		