



The Regional Center for Volunteerism
HandsOn Sacramento
COMMUNITY LINK CAPITAL REGION

BE THE CHANGE - VOLUNTEER!

Agency Partner Agreement

Agency Partner Name: _____

Address: _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Federal Tax-Exempt Identification Number _____

Executive Director _____

Volunteer Coordinator/Contact _____

Email _____

HandsOn Sacramento is the recognized leader of programs, partnerships, and services that maximize volunteer impact in the greater Sacramento community. Two overarching goals guide our work – to increase volunteer service in the community and to deepen the effect of volunteer service in local agencies. HandsOn Sacramento agrees to provide all benefits to Agency Partners as listed in the Benefits of Partnership.

THE ABOVE-NAMED ORGANIZATION, "AGENCY PARTNER" AGREES TO:

1. Certify that it is a non-profit 501(c)(3) agency, non-profit, government, service group, or educational entity serving valid community needs broader than the interests of its membership. Political campaigns and direct religious activity are excluded. If a membership organization, the organization's primary purpose must not be to enrich its members;
2. Carry general liability insurance;
3. Provide service to its clients without regard to race, color, religion, gender, sexual preference, national origin, age, marital or veteran status, or the presence of a non-related medical condition or disability. Likewise, it shall not discriminate in the acceptance of volunteers on these bases;
4. Provide HandsOn Sacramento with the name of a designated volunteer coordinator, director, or volunteer supervisor;
5. Submit volunteer request forms online following HandsOn Sacramento project proposal guidelines, with sufficient lead-time for publicity;
6. The final decision on placement of referred volunteers is with the Agency Partner. If required by the Agency, the screening of volunteers for appropriate assignment, including interviews, police background checks, fingerprinting,

psychological testing and other screening methods, is the responsibility of the Agency Partner. The Agency Partner is free to accept or reject any volunteer referred to it by HandsOn Sacramento based upon the evaluation of such volunteer by the Agency Partner. Upon its acceptance of a volunteer, the referred volunteer becomes a volunteer of the Agency Partner.

7. Indemnify each prospective volunteer and hold harmless HandsOn Sacramento, its officers, directors, employees and agents, against any and all claims, damages, liabilities, costs and expenses (including, without limitation, all attorneys' fees and litigation expenses) arising out of HandsOn Sacramento's referral of volunteer to the Agency Partner and any act or omission of any volunteer arising out of and in the course of volunteer services performed by a volunteer on behalf of the Agency Partner;
8. Assure that the volunteer position will not displace employed workers or impair existing contracts for services;
9. Provide an accessible workplace for volunteers and make reasonable accommodations for volunteers with special needs;
10. Provide relevant orientation, training, supervision, evaluation, recognition, and ongoing professional development for all volunteers working in the agency;
11. Support professional development opportunities for staff assigned to supervise volunteers;
12. Fully educate paid staff about the agency volunteer program and individual staff responsibilities to volunteers;
13. Respond to HandsOn Sacramento's periodic requests for updated information to maintain accurate and current volunteer opportunity listings, and notify HandsOn Sacramento of any change of address/telephone number/contact person within the volunteer program;

This Agency Partner Agreement may be terminated without cause at any time by either party upon notice to the other party. The terms of this agreement are at all times subject to amendment by written agreement.

Agreed and accepted by:

_____ Date _____
Agency Partner Executive Director Signature

_____ Date _____
Agency Partner Volunteer Manager Signature

PLEASE KEEP A COPY OF THIS AGREEMENT FOR YOUR RECORDS

Submit completed Agreement through one of the following:

(Preferred) Scan and/or Email to: mguevarra@communitylinkcr.org

Mail to: Attn: Mika Guevarra, HandsOn Sacramento
c/o Goodwill Industries; 8001 Folsom Blvd.
Sacramento, CA 95826