

AmeriCorps Seniors | RSVP Memorandum of Understanding (MOU)

Partner Organization: _____
Representative Name: _____
Address: _____
Phone: _____ E-mail: _____

Partner organization may represent multiple agencies/stations under this MOU. An agency/station is the physical location within an organization where volunteers serve. **List additional agencies/stations under this organization MOU here:**

This agreement contains understandings between the Greater St Cloud RSVP program and the above-named partner organization.

1. **Orientation of Volunteers and Volunteer Supervisors:** RSVP will conduct initial orientation for AmeriCorps Seniors RSVP volunteers and provide RSVP procedural information to volunteer station supervisors prior to placing RSVP volunteers in a volunteer position.
2. **Volunteer Position Descriptions:** The volunteer station will provide RSVP with a detailed description of each volunteer request and active volunteer positions. RSVP should be notified of any changes to a position description. Descriptions should be reviewed annually for revisions. At the time of volunteer recruitment or placement, RSVP will provide a copy of the position description to the volunteer.
3. **Volunteer Recruitment:** RSVP will recruit and interview individuals 55+ to match them with volunteer opportunities provided in the Position Descriptions to the best of our abilities.
4. **Volunteer Placement and Screening:** RSVP may arrange an initial interview between an interested RSVP volunteer and the station contact person. RSVP staff may also participate in this initial meeting. The volunteer station makes the final decision to accept the volunteer for a position. The station assumes responsibility to perform the same screening of RSVP volunteers as is routine for any other volunteer applying to serve at the station, including reference and/or criminal background checks. RSVP does not perform initial or ongoing reference or criminal background checks on volunteers.
5. **Training of Volunteers:** The volunteer station will ensure that RSVP volunteers receive orientation and training, initial and on-going, related to both the station and the assigned volunteer position to ensure retention and success.
6. **Volunteer Supervision and Follow-Up:** The volunteer station agrees to provide ongoing volunteer supervision and related follow-up of volunteers on assignments. RSVP will contact AmeriCorps Seniors periodically to gather volunteer feedback, experiences, satisfactions, concerns, and provide support.
7. **Recognition:** The volunteer station will ensure that RSVP volunteers are recognized and shown appreciation for service and time, which may be formal or informal.

8. **Out of Pocket Expenses:** The volunteer station will ensure that RSVP volunteers are provided with any materials, parking costs or reimbursement required specifically for their volunteer position.
9. **Travel Reimbursement:** RSVP volunteers may request bus fare or mileage reimbursement from RSVP for miles driven between their home and the volunteer station, up to 20 miles per day. RSVP does not reimburse for miles driven during a volunteer assignment. Stations are expected to provide reimbursement to RSVP volunteers for transportation expenses obtained during service tasks.
10. **Refreshments/Meals:** The station agrees to provide reasonable break-times and access to refreshments for RSVP volunteers in service. If a volunteer shift exceeds 4 hours, RSVP asks that arrangements are made to offer a meal to the volunteer, at no cost to them.
11. **Insurance Coverage:** RSVP will furnish accident, personal liability, and excess automobile liability insurance according to AmeriCorps service policies.
12. **Volunteer Safety:** The volunteer station will provide for adequate safety of volunteers, which includes a signed safety assurance document on file with RSVP. In consultation with RSVP, the volunteer station will make investigations and reports regarding accidents and injuries involving RSVP volunteers.
13. **Timesheets:** AmeriCorps Seniors volunteer hours must be documented and submitted to the RSVP office each month. The station agrees to collect, validate and **sign** timesheets for each month and submit them to RSVP no later than the **10th** of the month following service. Timekeeping is an important function and a requirement for placement of RSVP Volunteers. RSVP will provide the timesheet. Alternative tracking systems in use at a station are to be reviewed with RSVP staff to confirm they will be acceptable reporting methods. Documentation of alternative tracking systems are outlined in station volunteer job descriptions.
14. **Reporting Requirements:** RSVP will request statistical information from agency partner annually to comply with AmeriCorps federal reporting requirements.
15. **Letters of Agreement:** For in-home assignments where RSVP volunteers are placed to go into a private home, the volunteer station will obtain a letter of agreement signed by the client or a person legally responsible for the client, the station liaison, and the RSVP staff liaison authorizing the assignment, defining the activities, and specifying supervisory arrangements.
16. **Separation from Volunteer Service:** The volunteer station may request removal of a volunteer at any time. A volunteer may resign from service at the station or from RSVP at any time. RSVP staff, station staff and the volunteer will discuss possible termination to clarify the reason, resolve conflicts, or take remedial action including reassignment.
17. **Prohibited Activities:** The station will not request or assign AmeriCorps Seniors volunteers in RSVP to conduct or engage in religious, sectarian, or political activities.
18. **Displacement of Employees:** RSVP volunteers may not be assigned to any duties, which would otherwise be performed by an employed worker or which would supplant the hiring of or result in the displacement of employed workers or impair existing contracts for services.
19. **Prohibition of Discrimination:** The station will ensure that RSVP volunteers are not subject to discriminate on the basis of race, color, national origin, including limited English proficiency, gender, age, religion, sexual orientation, disability, gender identity or expression, political affiliation, marital or parental status, or military service.

20. **Accessibility and Reasonable Accommodation:** The station will maintain 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.
21. **Compensation:** Neither the grantee nor any volunteer station requests or receives compensation from the beneficiaries of AmeriCorps Seniors volunteers. Any volunteer station financial support of RSVP is not a precondition for that station to obtain volunteer service. AmeriCorps Seniors volunteers do not receive a fee for service from service recipients, their legal guardians, or members of their family, or friends.
22. **Consultation:** The volunteer station and RSVP agree to confer regularly to discuss volunteer needs, partnership opportunities and concerns.
23. **Acknowledgement:** The station agrees to acknowledge RSVP for volunteer recruitment, placements and support provided to the station through verbal, written, social media and other forms of communication. The volunteer station agrees to allow RSVP opportunities to promote AmeriCorps Seniors within the organization scope.
24. **Self-Certification:** By signing this agreement, the organization representative certifies that the volunteer station is a public or non-profit private organization, or a proprietary health care agency.
25. **Amendments:** This agreement may be amended at any time by either party subject to approval by both parties.

To be completed by the partner organization representative:

List other primary volunteer supervisor contacts for all station/agency placements under this MOU:

Name:
Title:
Phone:
Email:

Name:
Title:
Phone:
Email:

Partner Organization provides a meal option to RSVP volunteers during service?
 YES, please list meal value amount \$_____ NO

Partner Organizational status (must have on file with RSVP):
 Licensed Healthcare Facility (State of MN License)
 Government Entity
 Non-profit/501c3

Partner Organizational serves the following counties:
 Benton Sherburne Stearns Wright

AmeriCorps Seniors | RSVP Memorandum of Understanding Signatures:

Partner Organization Representative Signature: _____

Title: _____ Date: _____

RSVP Representative: _____

Title: _____ Date: _____



2023 Annual RSVP Partner Tracking and Safety Assurance Request (NEW PARTNER)

In accordance with the RSVP Memorandum of Understanding, RSVP relies on agency partners to provide statistical data (for federal grant reporting) and to adequately provide for the safety of AmeriCorps Seniors RSVP volunteers.

Please complete the following information, sign, and return this document:

Agency Information:

How do volunteers document service time at your agency?

- Timesheet
- Electronic pin/scan
- Other _____
- N/A

- | | | |
|--|------------------------------|-----------------------------|
| Agency is a faith-based organization? | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Agency is a disaster services organization | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Agency works in legal aid or elder justice initiatives | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Agency provides STEM programs. | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Agency provides evidence-based programs | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Agency provides opioid abuse prevention | <input type="checkbox"/> yes | <input type="checkbox"/> no |

Volunteer Safety Assurance:

Safety measures for volunteer may include, following CDC recommended guidelines to prevent the spread of COVID-19, having clearly marked emergency exits, posted fire escapes, accessible entrances, identified emergency shelter locations, safety training, etc.

By signing and dating this document you agree that your agency is adhering to safety standards when hosting RSVP volunteers.

Community Partner Organization: _____

Organization Representative Signature: _____ Date: _____

RSVP Director: _____ Date: _____

Email to: RSVP@ci.stcloud.mn.us

**Mail to: RSVP
1527 Northway Drive
St. Cloud, MN 56303**

Thank you for allowing RSVP volunteers to help meet your mission. By utilizing RSVP, you are also helping to foster engagement of volunteers 55+ to improve lives and strengthen communities.

Please contact RSVP if you have questions.
Main office – 320.255.7295 or Branch office – 763.765.3036