

Volunteer Guidelines

UCI Basic Needs Center



UCI Basic Needs Center appreciates your services and we will do our utmost to ensure that your volunteer experience is rewarding, productive and safe. We are committed to respecting your skills and individual needs within the limitations of these requirements. We ask your cooperation in following these guidelines.

1. Come dressed to volunteer. Closed toe shoes and appropriate clothing are required for food sorting. Sandals or offensive clothing are not permitted.
2. Follow staff instruction and complete duties as assigned.
3. All personal belongings, purses, backpacks, computers, etc., should be left in your vehicle or in a staff locker. UCI Basic Needs Center assumes no responsibility for damage to or loss of personal property of volunteers.
4. Health and Hygiene – If you are ill, refrain from volunteering. Proper hygiene is required as well as hand washing before handling food.
5. Be safe. Use proper lifting techniques, using your legs to push upwards, keeping your back straight and body balanced. Solicit the help of another person to lift objects over 20 pounds. Ask for help if you need assistance.
6. Running, shouting, horseplay (tossing food, etc), riding dollies, walking or stepping on pallets is not permitted.
7. Harassment of any kind is not tolerated by staff or volunteers. Any behavior intended to create discord or restricting volunteers or staff from working will not be tolerated. Report incidents immediately to staff.
8. Anyone under the influence of drugs and/or alcohol will not be permitted to volunteer. Smoking is also not allowed

I have read and understand my responsibility to follow these rules while I am a volunteer for the UCI Basic Needs Center. If I am ill, I will refrain from volunteering. Any injuries will be reported immediately to staff. I understand that I will be asked to discontinue volunteering and leave the premises if I do not follow these requirements and show good judgment.

Volunteer Print Name: _____ Date: _____

Volunteer Signature _____

VOLUNTEER RECORD

(To be completed by the University and maintained in the Department)

Department Name: Student Life & Leadership, UCI Basic Needs Center

Volunteer Name: _____

Assignment Beginning Date: _____ **End Date:** _____

Description of services to be rendered on a volunteer basis*:

- Intake deliveries and donations
- Help answer pantry client questions
- Sorting, organizing, and light cleaning
- Inventory checks & restocking shelves
- Help with setup for workshops, events or programs

Name of supervisor: Andrea Mora

Location where volunteer assignment will be performed: Campus Medical Center Other

Building name and room number: UCI Basic Needs Center: 800 W Peltason Drive

(To be completed by the volunteer)

Name: _____

Address: _____

Home telephone: _____ Work telephone: _____

If a student, name of school: UC Irvine _____

In case of emergency, contact:

Name: _____ Relationship to volunteer: _____

Day telephone: _____ Evening telephone: _____

The volunteer service described above will be uncompensated. I understand that either the University or I may discontinue the volunteer service at any time without notice. I agree to abide by all rules and policies of the University.

Volunteer _____ Date _____

University Representative & Title _____ Date _____

Andrea Mora
Director, UCI Basic Needs Center

*Services should not include contact with human blood, body fluid or tissue, radioactive compounds or hazardous chemicals without prior consultation with Environmental Health and Safety to ensure the volunteer has the appropriate training, vaccinations and health coverage.