



**United Community Center/Centro de la Comunidad Unida**

1028 S. 9th Street  
Milwaukee, WI 53204  
Tel: (414) 384-3100  
Fax: (414) 649-4411  
www.unitedcc.org  
Contact: Barbara Cerda

---

## Volunteer and Agency Agreement

Any relationship is enhanced by good communication. This agreement outlines the expectations of the volunteer and the United Community Center (UCC) so the volunteer can be most successful in meeting their own personal needs while fulfilling UCC's mission.

### UCC Agrees to:

1. Provide adequate information, training and assistance for each volunteer to be effective.
2. Willingly receive the volunteers' comments and suggestions.
3. Treat each volunteer as a member of our team.
4. Provide feedback on volunteer performance and appreciation for their work.
5. Respect the skills, dignity and individual needs of each volunteer.

Melanie Manuel

Signature of UCC Community Relations Coordinator

\_\_\_\_\_ Date

### The Volunteer Agrees to:

1. Act as a member of the team at all times to accomplish the mission of UCC.
2. Be **punctual** and **conscientious** in fulfilling my duties.
3. Dress **appropriately** for the position, according to the following guidelines:
  - o No short shorts (i.e. shorter than hands held at side)
  - o No mini-skirts
  - o No crop tops
  - o No ripped jeans
  - o No t-shirts with any age-inappropriate material (alcohol related, obscene pictures and/or language, etc.)
  - o No sleeveless shirts/tank tops
4. Adhere to my schedule and promptly report any absence.
5. Perform my volunteer duties to the best of my ability and conduct myself with honesty, dignity and courtesy.
6. Take any problems, concerns or suggestions to the Volunteer Coordinator or my supervisor.
7. Follow all rules and accept supervision with a willingness to learn, and ask about things not understood.
8. Adhere to the drug-free workplace policy. **Volunteers must not use or be under the influence of controlled substances while volunteering.**
9. Use office equipment (computers, phones, etc.) and supplies **for UCC business only**, unless given specific permission.
10. Notify the Volunteer Coordinator when I am no longer able to volunteer, or if my volunteer work will be interrupted for an extended period of time.

### Confidentiality Agreement:

As a condition of volunteer placement, I agree not to divulge to unauthorized persons any confidential information obtained from observation, conversation, correspondence, personal records or any other source. This includes information about both the staff and people served by our agency. I will not publish, orally disclose or otherwise make public any confidential information, except as I am legally required.

### Information Release:

I understand that UCC may use my story and/or photo of my volunteer activities in future print or website publications. I consent the release of this information.

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

Please print name: \_\_\_\_\_