STATE OF CALIFORNIA
VOLUNTEER RECORD AND SERVICE AGREEMENT
DGS OHR 79 (Rev. 10/2019)

DEPARTMENT OF GENERAL SERVICES
Office of Human Resources

VOLUNTEER'S LAST NAME	FIRST NAME	Middle Initial

OFFICE   SECTION/AREA

WORK STREET ADDRESS	CITY	STATE	ZIP

IF AN INTERN, SHOW SCHOOL CURRENTLY ENROLLED IN   MAJOR

DATES VOLUNTEER WILL WORK   TENTATIVE WORKING SCHEDULE

Effective Date: Expiration Date:
DUTIES

Indicate if duties will include any of the following:

Travel   Handling of Money   Driving a State Vehicle*   Driving a Personal Vehicle on State Business*
*Please supply Driver's License number: and expiration date:

As assigned by department personnel, I will comply with all policies, procedures, rules, regulations, directives and instructions provided by the volunteer coordinator. By entering into this agreement, I understand that I am an employee of the Department of General Services for purposes of Workers Compensation Insurance coverage only and will not receive a salary or wages. I will conduct myself in accordance with those standards set forth for regular department employees. I understand and agree to the following policies and conditions.

Any training provided by the Department is to assist the volunteer in performing functions and duties which are of benefit to the community and/or to the volunteer.

The volunteer does not replace any regular department employee.

The volunteer may be reimbursed for necessary allowable expenses for subsistence and travel in connection with approved volunteer services. Such reimbursement shall be in accordance with Board of Control Rules.

If the volunteer operates a private motor vehicle as part of his/her volunteer activities, he/she must file a certification of insurance coverage and mechanical safety of the automobile.

Note: Please complete and submit a STD 689, OATH OF ALLEGIANCE along with the OHR 79.

SIGNATURE OF VOLUNTEER   DATE

SUPERVISOR NAME   SIGNATURE   DATE

APPROVED BY OFFICE CHIEF   SIGNATURE   DATE