Volunteer Agreement

As a volunteer at Helping Link, you are important member of our team and act as a representative of our organization to the community at large. For a better understanding of what you can expect as a volunteer and what is expected of you by our organization, we ask you to read and sign this Volunteer Agreement. We look forward to continually a mutually beneficial partnership that benefits you and the community we serve.

Helping Link will provide for you:

- Beneficial and life-enriching experiences.
- Opportunities for professional development and social interaction with other volunteers.
- Appropriate placement as a volunteer with a job description detailing duties and responsibilities.
- Supervision on perform your volunteer job.

As a valued volunteer, you agree to:

- Provide volunteer services for an agreed number of hours on a scheduled basis that is acceptable to both you and Helping Link.
- Cooperate with staff to ensure an assignment appropriate and that makes the best use of your abilities, interest, and time.
- Communicate immediately with staff if you have challenges or concerns that impact your ability to perform your volunteer job.
- Notify the organization beforehand if you will be absent or if you have arranged a substitute.
- Conduct yourself in an appropriate and ethical manner at all times when dealing with visitors, volunteers, board members and staff.
- Exercise good judgment and care at all times to avoid unauthorized or improper disclosures of confidential information of Helping Link! Conversations in public places, such as restaurants, elevators, and public transportation, should be limited to matters that do not pertain to information of a sensitive or confidential nature.
- Please silent your cell phone while volunteering and step outside for personal phone call.

Have fun and agree to ask questions if needed. Remember we are here for you!

By my signature, I declare that I have read, understand, and agree with all parts of this Volunteer Agreement.

________________________  _________________________  ______________
Name                             Signature                          Date

Helping Link is a 501(c)(3) nonprofit organization, in Washington State. Federal Tax ID # 20-1988027

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Confidentiality/Non-Disclosure Agreement

Everyone (including volunteers, staff and consultants) at Helping Link are to hold confidential all personal information of others (for example, students, clients, volunteers, donors and other persons affiliated with Helping Link) (collectively, the “Affiliates”). Names, contact information, gift history or any other data about our Affiliates (collectively, the “Information”) must not be shared with anyone else unless there is specific written authorization from the Executive Director of Helping Link, and it is everyone’s responsibility to take appropriate steps to safeguard such Information.

I understand the above policy and agree not to disclose any Information or use it for any purpose not expressed authorized by the Executive Director of Helping Link. I agree I will (i) hold the Information in strict confidence, (ii) use such Information only for the purpose of performing volunteer services assigned by Helping Link, (iii) not reproduce such Information except to the extent necessary for performing the work of Helping Link, (iv) not disclose such Information to any other person not authorized by Helping Link. I will make every effort to keep the Information secure and follow any procedures as may be outlined by Helping Link for the project.

At the conclusion of my volunteer service, I will ensure that any data and information is returned to Helping Link and any copies existing on outside computers are deleted.

____________________  __________________
Name                  Date