



Print Full Name: _____ Date: _____

By initialing below, I agree to take the following actions to help Pathways of Hope (hereafter referred to as Pathways) maintain a work environment that is as safe and effective as possible for all volunteers, staff and clients:

COVID-19 Safety Protocols:

___ I will wear a protective face mask when required covering both my mouth and my nose at all times while volunteering onsite.

___ I will strive to adhere to physical distancing and do my best to maintain a 6-foot distance from all volunteers, staff, and clients at all times.

___ I agree to follow all cleaning and sanitation protocols during every volunteer shift including, but not limited to, cleaning and sanitizing surface areas, door handles, and work areas.

___ I will contact a Pathways staff member if I learn I was exposed to COVID-19 or tested positive for COVID-19 if I have volunteering onsite as recommended by the most recent CDC guidelines.

___ I will allow Pathways to contact me about possible COVID-19 exposures.

___ I will take the recommended days off from volunteering onsite at Pathways if I learn I have been exposed to COVID-19.

___ If I have any questions about COVID-19 I can find information at the OC Health Agency, <https://ocCOVID19.ochealthinfo.com/>

Scheduling & Contact Protocols:

___ I will notify Pathways staff and/or the Lead Scheduling Volunteer as early as possible if I am not able to attend my shift due to illness, exposure, vacation, or any other reason.

___ I will allow Pathways staff and the Lead Scheduling Volunteer to contact me regarding onsite volunteer shifts.

Photo Release:

___ I agree to allow Pathways to share photos of myself volunteering on social media and in other marketing materials.

Dress Code:

___ I agree to use good judgment, good hygiene and good taste, showing courtesy to stakeholders, visitors, clients, staff, and partners by dressing in a fashion that is presentable and does not make others uncomfortable.