

**THOROLD PUBLIC LIBRARY BOARD**  
**Policy Manual**

**Policy No: 19-006**  
**Date: September 16, 2019**

**Motion No: 19-09-11**  
**Year of Next Review: 2023**

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## **Volunteer Policy**

### **Policy Statement**

A volunteer is someone who performs tasks for the Thorold Public Library without wages, benefits or expectation of compensation, beyond reimbursement of mileage. Volunteers can enrich library services and inform the public about the library.

### **Regulations**

1. Volunteers shall only be used by the Library to enrich or expand library services or to free skilled paid staff for other duties. Volunteers shall not be used to replace paid employees, and no part of this policy should be seen to supersede the collective agreement between the library board and its bargaining unit, CUPE 2220.
2. All volunteer applicants shall be asked to complete a volunteer application form and the Contract for Volunteer Services (Appendix A). All volunteers may be asked to complete an additional waiver before completing their volunteer assignment (Appendix B).
3. Volunteers are members of the Library in good standing.
4. The Chief Librarian and/or designate shall be responsible for selecting, interviewing, assigning and terminating volunteers. Every effort will be made to match volunteer ability to the opportunity available. The Library's overall mandate, however, always takes precedence and opportunity for volunteer involvement may be restricted.
5. Each volunteer shall have a specific paid staff member to whom the volunteer reports to.
6. All volunteers will receive orientation to the organization and will be provided with the necessary training for satisfactory performance, including but not limited to relevant instruction in Health and Safety practices, and AODA training.

7. Professional conduct and dress are expected at all times during a volunteer assignment. When volunteering in the library or in the community on behalf of the library, volunteers are expected to comply with the Rules of Conduct Policy. Failure to do so may result in the volunteer being asked to leave.

8. In the event of an opening for a paid position on the Library staff, volunteers who apply for the position shall be evaluated on the same basis as all other applicants.

9. Volunteers are responsible for their own liability coverage and for their own parking tickets and/or fines.

10. Each volunteer selected to perform duties at the Library shall be required to sign a volunteer agreement which includes a confidentiality clause. Failure to maintain confidentiality will result in immediate termination.

11. The Library reserves the right to request a Criminal Record Check from a volunteer prior to any task assignment. The Thorold Public Library will not reimburse the volunteer for the cost of a Criminal Record Check.

12. Volunteers who do not adhere to the policies and procedures of the Library or who fail to satisfactorily meet the expectations of their volunteer assignment are subject to dismissal.

# Appendix A

## Thorold Public Library Contract for Volunteer Services

As a Volunteer, I fully understand and agree to the following:

1. I agree to hold harmless the Thorold Public Library (“The Library”), Thorold Public Library Board and the Corporation of the City of Thorold from all claims, demands, causes of action, loss, costs or damages that the Library may suffer, incur or be liable for in relation to any injury or property damage I may suffer or cause in connection with my participation as a volunteer. I hereby release, waive, indemnify, and discharge the Library, the Library Board and the Corporation of the City of Thorold from all liability to my heirs, executors, administrators, and assignees for all loss or damage and any claims or demands for such loss or damage on account of injury to person or property.

2. I understand the Ontario Workplace Safety and Insurance Act does not apply to volunteers, and that as a result I am not entitled to make any claims for compensation pursuant to the Ontario Workplace Safety and Insurance Act.

3. Pursuant to Section 39 (1) of the Municipal Freedom of Information & Protection of Privacy Act 1989, I authorize the Library to verify all information and/or dates contained in my application including contacting the persons listed for the purpose of obtaining personal references and any data contained in my personnel file.

4. Except as authorized, I will not disclose, release or make use of any confidential or personal information that has been shared with, or acquired by me as a volunteer.

5. I will not receive any remuneration, salary, wage, payment or any employee benefits whatsoever, and I understand that there is no employment relationship as a result of my volunteer activity. Further, I understand that the Library may at its sole discretion reassign me or terminate my services as a volunteer, without notice or compensation.

6. If requested by the Library, I will provide a criminal record check performed within the past 12 months. I acknowledge that the Library will not reimburse me for the criminal record check.

7. I have read and understood the Library’s volunteer policy and agree to abide by the conditions therein.

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Signature of Volunteer Date

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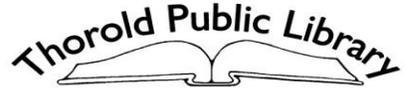
Print Name

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Signature of Parent (if person is under 18) Date

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Print Name



## Appendix B

### Teen Volunteer Application for Community Service Hours

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Special skills/talents: ( ie: Are you a writer / artist / graphic design? )

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Why are you interested in volunteering at the Library?

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Applicants must have a library card in good standing. Duties include, but are not limited to, summer program assistance, shredding paper, and odd jobs. Once you have completed the application, please sign below, have a parent or guardian sign the permission section and return it to the library.

**Teen Signature:** \_\_\_\_\_

#### Parental Permission & Photo Release

I am aware that my child has expressed an interest in doing community services hours and I give Thorold Public Library the absolute right and permission to use photograph(s) of my child in its promotional materials and publicity efforts. I understand that the photograph(s) may be used in a publication, print ad, direct-mail piece, electronic media (e.g. DVD, video, Internet; facebook, website, youtube) or other form of promotion or information. I release Thorold Public Library, its agents, staff and the photographer from liability for violation of any personal or proprietary right I may have in connection with such use.

**Emergency Contact:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Parent/Guardian Signature:** \_\_\_\_\_

*Personal information collected on this form is for Library purposes only.*

**www.thoroldpubliclibrary.ca - 14 Ormond St. N. Thorold - L2V 1Y8 -  
905-227-2581 – thoroldpubliclibrary@cogeco.net**

## Appendix C

The Corporation of the City of Thorold  
Hereinafter referred to as the "Municipality"

### WAIVER AND RELEASE

**Event:**

**Date:**

**Location:**

In consideration of volunteering on behalf of the Thorold Public Library, Thorold Public Library Board and the "Municipality".

### ELEMENTS OF RISK:

I acknowledge that my participation as a volunteer involves certain elements of risk including but not limited to cuts, abrasions, sprains, fractures, spinal injury, brain injury or even death. The risk of sustaining injury can result from the nature of the activity itself, natural and manmade, climatic conditions, the actions of third parties and the participant's own physical condition and actions.

The risk of sustaining these types of injuries can result from the nature of the activity and can occur without any fault of the volunteer, or the Thorold Public Library or the Thorold Public Library Board or the "Municipality", its employees, agents, council members, or the facility where the activity is taking place. By choosing to volunteer in this activity, you are accepting all risk that you may be injured.

The chance of an injury occurring can be reduced by carefully following instructions at all times while engaged in the activity.

**If you choose to participate as a volunteer on behalf of the Thorold Public Library, Thorold Public Library Board and the "Municipality" you must understand that you bear the responsibility for any injury that might occur.**

**I HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE the Thorold Public Library, Thorold Public Library Board, the "Municipality" and its employees, council members, officials and officers from all claims, demands, costs, expenses, actions and causes of action in respect of death, injury, loss or damage to my person or property however caused, arising or to arise by reason of my participation as a volunteer for the Thorold Public Library, Thorold Public Library Board and the "Municipality".**

**I FURTHER AGREE to save harmless the Thorold Public Library, Thorold Public Library Board, the “Municipality” from and against any and all liability arising from or as a result of, my duties as a volunteer for the Thorold Public Library, Thorold Public Library Board and the “Municipality”.**

**In order to participate, I HEREBY AGREE to do so at my own risk and understand that I do not have access to WSIB as this is a volunteer event, unless otherwise specified in another agreement.**

**BY SIGNING this form, I acknowledge having read, understood and agreed to the above waiver, release, and to hold the Thorold Public Library, Thorold Public Library Board and the “Municipality” harmless.**

Signature of Volunteer

Date

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Please Print:

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