

**White Bear Area Senior Program
Volunteer Confidentiality Agreement**

The mission of the White Bear Area Senior Program is to provide information, activities, and services to enhance the lives of older adults. We strive to provide and create opportunities in a manner which affirms the dignity and self worth of each individual.

Our clients health and safety is the primary concern. We ask volunteers to please observe the following guidelines. This agreement is distributed to all volunteers to protect the welfare of those we serve.

As a White Bear Area Senior Program volunteer, I understand and am expected to:

- Be aware of the general mission of the agency (to provide information, activities, and services to enhance the lives of older adults. We strive to provide and create opportunities in a manner which affirms the dignity and self-worth of each individual.)
- Project a positive attitude and be reliable to my volunteer assignment.
- Respect all clients, staff and other volunteers.
- Provide honesty and integrity while working with the White Bear Area Senior Program.
- Adhere to staff directions, guidance and policies.
- Accept all people as individuals and listen to understand.

I realize that it is my responsibility to protect any information I may learn or be given by any person with whom I am assigned to work. It is essential to protect not only names, but also to keep all details strictly confidential. It is my understanding that some information may need to be shared with my volunteer supervisor in order to receive professional guidance in my work. I can expect that information shared with my supervisor will be kept confidential.

I understand that if I observe or am told of behavior that would indicate that an individual may be a victim of abuse, neglect, or self-neglect to the extent that his or her safety is in danger, I am required to report this immediately to my supervisor.

I understand that when in the public view, I will refrain from giving my personal opinions to the media, press, public audiences, television and/or radio, as they “*may not*” represent the official position of the White Bear Area Senior Program/ White Bear Lake Area Schools.

I understand and fully acknowledge that, in volunteering for the White Bear Area Senior Program, I am entering an at-will relationship and that this relationship can be terminated at anytime for *just cause*.

I shall indemnify, defend and hold the White Bear Area Senior Program harmless from any claims, liabilities, losses, demands, costs and expenses of any kind, including reasonable attorney’s fees, which the White Bear Area Senior Program/White Bear Area Schools may hereafter incur, sustain or be required to pay by reason of any negligent act or omission or any intentional misconduct by myself.

I understand by signing this agreement, I am confirming that all information I provide is TRUE and complete to the best of my knowledge. I acknowledge that I have read and understand this information and agree to its provisions as stated above.

Name of Adult Volunteer: _____ Date: _____

Name: _____ Parent Signature: _____
(If under age 18)