Appendix B.1 – Sample Memorandum of Understanding

Memorandum of Understanding
ABC County RSVP

This Memorandum of Understanding (this “MOU”) contains basic provisions, which will guide the working relationship between both parties. It is entered into by and between ABC County RSVP, sponsored by ABC SPONSOR AGENCY and the following agency and/or entity (the “Station”):

Station Name: _____________________________  EIN: _____________________________
Station Site Address: _____________________________ City: _____________________________ State: ______ Zip: ______
(Station Mailing Address): _____________________________ City: _____________________________ State: ______ Zip: ______

The ABC County and the Station may be referred to herein as the “Parties.”

This MOU is effective from _______________ through _______________. This MOU may be amended in writing at any time with the concurrence of both parties and must be renegotiated at least every three (3) years.

Basic Provisions

The ABC County’s Responsibilities

1. Recruit, enroll, and interview RSVP volunteers.
2. Refer RSVP volunteers to the Station
3. Review acceptability of volunteer assignments.
4. Instruct RSVP volunteers in proper use of volunteer timesheets, reimbursement guidance, and the RSVP procedures.
5. Provide the RSVP orientation to the Station staff prior to placement of volunteers and at other times as needed.
6. Initiate publicity regarding RSVP.
7. Furnish accident, personal liability, and excess automobile insurance coverage for enrolled volunteers required by the RSVP policies. The insurance provided by the sponsor is secondary coverage and is not primary insurance.
8. Periodically monitor volunteer activities at the Station to assess and/or discuss needs of volunteers and the Station.
9. Staff an Advisory Council to RSVP. Along with the advisory council, arrange for appeals procedure to address problems arising between the volunteer, the Station and/or RSVP.
10. Arrange for appropriate RSVP recognition.
11. Coordinate with other volunteer and aging programs in the area to foster effective communication and avoid duplication.
12. Reimburse RSVP volunteers for transportation costs between their home and volunteer station in accordance with
RSVP policies and availability of funds (if applicable).

13. Arrange with the Station for meals and/or snacks, whenever possible, for volunteers on assignment.
14. Provide photo identification for volunteers if not provided by the station.

The Station’s Responsibilities

1. Interview and make final decisions on assignments of RSVP volunteers.
2. Perform, if required for a particular assignment, background or other screenings.
3. Implement orientation, in-service instruction, and/or special training of volunteers.
4. Furnish volunteers with materials required for assignment. These materials may include station uniform and photo I.D.
5. Provide supervision of volunteers on assignments. (Supervisor name and contact information on next page.)
6. Provide volunteer assignment descriptions for each volunteer opportunity at the Station.
7. Provide for adequate safety of volunteers and submit an annual assurance upon request to ABC County RSVP.
8. Investigate and report any accidents and injuries involving RSVP volunteers immediately to ABC County. All reports shall be submitted in writing.
9. Specify, either by written information or verbally, that RSVP volunteers are participants in the Station’s programming in publicity featuring such volunteers. Display an RSVP placard where it may be viewed by the public.
10. Reports: The Station Representative shall:
   • Timesheets: Report volunteer hours on a monthly basis on or before 10th of the following month (Insurance coverage is only effective with verified records of hours served.)
   • Progress Reports: Stations are requested to complete a short bi-annual survey provided by RSVP documenting the impacts of services provided by volunteers.
   • In-Kind Documentation: Provide documentation of in-kind contribution(s) (meals, uniforms, mileage reimbursement, training expenses) and verification to help RSVP meet its local match of 30%.

Other Provisions

1. Separation from Volunteer Service: The Station may request the removal of an RSVP volunteer at any time. An RSVP volunteer may withdraw from service at the Station or from the RSVP at any time. The RSVP staff, the Station staff, and volunteers are encouraged to communicate to resolve concerns or conflicts, or take remedial action, including, but not limited to, placement with another station.
2. Letters of Agreement: For in-home assignments, the Volunteer Station will obtain a Letter of Agreement signed by the person or persons legally responsible for the child served, the Volunteer Station liaison, and the RSVP liaison authorizing the assignment of an RSVP volunteer in the child’s home, defining the volunteer’s activities, and specifying supervisory arrangements.
3. Religious/Political Activities: The Station will not request or assign RSVP volunteers to conduct or engage in religious, sectarian, or political activities.

Version 2019.4

This document is provided as a sample ONLY. Its use is optional and, if used, it should be customized as appropriate. For all appendices, including editable versions of samples and templates, visit https://www.nationalservice.gov/operations-handbook-appendices.
4. **Displacement of Employees:** The Station will not assign RSVP volunteers to any assignment which would displace employed workers or impair existing contracts for services.

5. **Compensation:** Neither the station nor RSVP will request or receive compensation from the beneficiaries of RSVP volunteers. RSVP volunteers will not receive a fee for service from beneficiaries.

6. **Accessibility and Reasonable Accommodation:** The Station will maintain the programs and activities to which RSVP volunteers are assigned accessible to persons with disabilities (including mobility, hearing, vision, mental, and cognitive impairments or addictions and diseases) and/or limited English language proficiency and provide reasonable accommodation to allow persons with disabilities to participate in programs and activities.

7. **Prohibition of Discrimination:** The Station will not discriminate against RSVP volunteers, service beneficiaries, or in the operation of its program on the basis of race, color, national origin, gender, age, religion, sexual orientation, disability, gender identity or expression, political affiliation, marital or parental status, or military service.

8. **Termination of MOU:** This MOU may be terminated at any time by either party by sending written notice of termination of the MOU to the other party. This MOU shall be reviewed at least every three (3) years by the Parties.

9. **Signatures.** By signing this MOU, the Station, through its authorized representative, self-certifies that it meets the requirements necessary to become a RSVP Station.

10. **If meals are provided by the Station to RSVP volunteers, please complete this portion:**

    ( ) Contributed meals are **FEDERALLY FUNDED** under:

    ( ) Title III of the Older Americans Act
    ( ) Other (federal) funding source

    ( ) Contributed meals are not provided by FEDERAL FUNDS.

    Meals will be provided to RSVP volunteers at a free or reduced price of $________ when the ___ hours of service have been or will be volunteered during that day. The value of the meal provided is $________ each. (RSVP will utilize this information to meet its local in-kind match.)

### For All Stations

**Volunteer Supervisor [Station Staff]**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Title:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Phone:</th>
<th>Email:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Volunteer Station Primary Type: To qualify as a RSVP Station, an agency/office/department must self-certify that it is one of the following:

---

Version 2019.4

This document is provided as a sample ONLY. Its use is optional and, if used, it should be customized as appropriate. For all appendices, including editable versions of samples and templates, visit [https://www.nationalservice.gov/operations-handbook-appendices](https://www.nationalservice.gov/operations-handbook-appendices).
Appendix B.1 - Sample Memorandum of Understanding

☐ Public Non-Profit ☐ Private Non-Profit ☐ Proprietary Health Care Agency ☐ Governmental Agency

**Authorized Signatures**

<table>
<thead>
<tr>
<th>Authorized Station Representative</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>RSVP Project Director [or other sponsor designated representative]</td>
<td>Date</td>
</tr>
</tbody>
</table>

**PLEASE RETURN THIS COMPLETED FORM TO:** ABC RSVP, PO Box 123, Our Town, XX 81234  
Please include a volunteer assignment description for each volunteer opportunity at the Station. Thank you!