



451 N. State Road 7, Plantation, FL 33317  
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#### **GENERAL COMMITMENT AND UNDERSTANDING**

I agree to abide by all the policies and procedures established by Meals on Wheels South Florida (MOWSOFLO) in the preparation, delivery, serving meals to seniors and any other general duties that may be assigned. Although I am not an employee of MOWSOFLO, I understand I can be dismissed as a volunteer, should my actions or performance as a representative of MOWSOFLO be inconsistent with program standards. I also understand that I am not covered under MOWSOFLO liability, accident, driver, or injury insurance.

Each volunteer must maintain a firm commitment to professional conduct:

1. Client files and/or cases must be held in strict confidence,
2. Notification is necessary when you are absent from scheduled volunteer duties, and
3. Advance notification of at least two weeks should be given when a volunteer plans to become inactive.
4. Each volunteer is required to attend volunteer orientation and is strongly encouraged to attend in-service training.

#### **Qualifications**

Volunteer drivers must be 18 years of age. Persons under 18 can volunteer only if accompanied by an adult. A signed and completed volunteer application must be on file before volunteering. Copies of a valid driver's license and current vehicle insurance (if driving) must be provided.

#### **Confidentiality Agreement**

I understand that ALL information regarding cases and recipients is strictly confidential. Any questions should be directed to MOWSOFLO staff only. I also understand that confidential information is only given to me if it pertains to my volunteer duties and that no copies or originals of any confidential information must ever be removed from MOWSOFLO offices. I further understand that, if I do not respect or maintain the confidentiality of all information given me through my volunteer duties, I am personally liable for its release and will be required to give up my volunteer position.

#### **Consent Form to Check Criminal Record**

I agree to submit my fingerprint for the Level II Background Screening if required by Florida State Law. I hereby authorize MOWSOFLO to obtain information pertaining to any charges and/or convictions I may have had for federal and state criminal law violations. This information will include but will not be limited to allegations and convictions for crimes committed upon minors and will be gathered from any law enforcement agency of this state or any state or federal government, to the extent permitted by state and federal law.

#### **Attestation/Reference Check Release**

I hereby declare that all information given and statements made herein and in conjunction with this application are true; and if accepted, any information discovered to be false is grounds for termination. I also consent to have all information checked and give my permission to any and all persons contacted to release any related information requested in connection with this volunteer application, and I agree not to hold any such person or company liable for the information that they give out.

**Voluntary Release**

I hereby confirm that in conjunction with my volunteer delivery of MOWSOFLO, I agree to each of the following:

1. I shall be solely responsible for each and all of my acts and omissions, including but not limited to the use of any motor vehicles, walking and carrying meals, and interacting with MOWSOFLO clients.
2. I hereby fully release and forever discharge MOWSOFLO [and, if I am employed, my employer] from and against any and all liability, including but not limited to any and all claims, complaints, causes of actions, suits, debts, breaches, injuries, or other liability, of any kind or character whatsoever, arising out of or relating to the performance of my volunteer services for MOWSOFLO; and
3. I represent and warrant that I have, and will maintain throughout the period I am a MOWSOFLO volunteer, public liability and property damage insurance, with policy limits in accordance with state law, for any vehicle I may drive. I further represent and warrant that I have a valid driver's license and that I have no knowledge of any facts, conditions, or circumstances that would impair or preclude me from safely operating a motor vehicle, from safely walking with trays in my hands, or from climbing steps with trays in my hands.

**Email Marketing**

I hereby confirm that I agree to have my name and email address included in MOWSOFLO's database for volunteer communication purposes. By submitting this form, you are consenting to receive marketing emails from: Meals on Wheels South Florida, 451 N. State Road 7, Plantation, FL, 33317. You can revoke your consent to receive emails at any time by using the SafeUnsubscribe® link, found at the bottom of every email. [Emails are serviced by Constant Contact](#)

**Terms Updated: July 2018**