

Yavapai COLLEGE



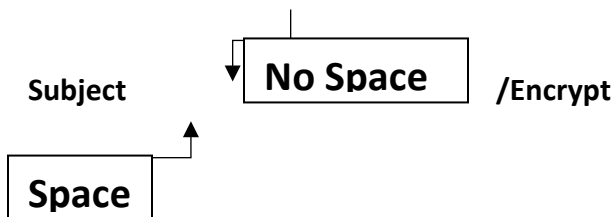
Hiring Managers' Instructions for Volunteers

A person interested in volunteering for a specific department will either email, call, or visit the department. The manager will speak with the potential volunteer and ask that a volunteer application form be completed.

- The volunteer will complete a volunteer form and return the completed form to the manager.
- The manager or designee should check the form for completeness, i.e., social security number and a signature.
- The manager fills out the department name and signs the form.

Once the form is reviewed and signed, the form can be either:

- Emailed by secure upload: [YC Secure Uploader](#)
Follow the prompts and mark the application as "volunteer."
- Contact the HR department's front desk and advise of an incoming secured volunteer application.
- You may also email the application as encrypted. To encrypt the application, type the following on the subject line: Volunteer *space* forward slash *no space* Encrypt. See the example below.



Once the application is sent to HR, please shred the Volunteer Application, (if applicable).

HR will request a background report.

Upon receiving the volunteer's cleared background, HR will enter the volunteer's information into Banner, which will generate a Y number.

Once a cleared background comes back from the Background Company, HR will enter the Volunteer information into Banner.

HR will email the hiring manager indicating the volunteer's application has been processed and providing the Y number.

Upon receipt of the HR email, the start date can be discussed with the new volunteer.

Time and Attendance:

All volunteers must sign in and out at their assigned college work site. All volunteer areas must have a daily volunteer sign-in sheet. For security and safety reasons, and in case of an emergency, college administrators need to know who is present on campus and why. Please remind volunteers to sign-in and sign-out each time they visit their department. Keeping track of volunteer hours also enables the College to evaluate our Volunteer Program and recognize the value of our volunteers.

Dress:

Volunteers should dress professionally. However, individual departments may require specific attire.

ALL volunteers *must park in the general parking area* (if applicable) and report to the manager. Please keep customer service in mind and refrain from parking in spaces closest to the work area. (Unless the space is considered necessary for the volunteer).

Manager's Responsibilities:

- The department manager or manager's delegate will inform volunteers of their reporting location, work assignment(s), and all pertinent information before starting.
- Advise ALL volunteers they must park in the general parking area, (if applicable) and report to the manager. Please refrain from parking in spaces closest to the work area unless advised to park elsewhere by the manager.
- Managers will provide an orientation, including restrooms, lunch facilities, location of work area, etc.
- Managers should strive to make their volunteers feel the assistance they give is worthwhile and contributes to the overall success of the students, the College, and the community.
- Managers should ensure volunteers are treated with respect and consideration by all YC students, faculty, and staff.
- Be given a suitable assignment in line with their areas of interest, skills, and, if possible, at convenient locations.
- Managers should try to work within the volunteer's available times.

Training:

The YC College has an Emergency Response Plan (ERP), This plan is for the protection, safety, and well-being of the staff, volunteers, and patrons of the YC College. It identifies necessary staff and volunteer actions during fire and other emergencies. A copy of this plan and other Safety Plans are available to all staff and volunteers at:

[Emergency Response Guide](#)

Additionally, volunteers are assigned mandatory training through NeoEd. This training must be completed within 30 days of their start date.

College Closures:

Yavapai College is committed to providing a safe environment for all students, faculty, staff, volunteers, and visitors. While Yavapai College makes every attempt to maintain regular operating hours, from time to time, inclement weather or emergencies may necessitate a closure or delayed opening of the College.

In these situations, the college president and campus police will decide at the earliest possible time to allow faculty, students, staff, and volunteers to plan accordingly. In most instances, the college status will be communicated by early morning. The decision will be based on actual conditions and/or forecasts with safety as the primary goal.

Please keep in mind that the decision to travel to Yavapai College is always a personal one. If the volunteer is not comfortable traveling in adverse conditions, they should contact the manager well in advance of their scheduled time to arrive.

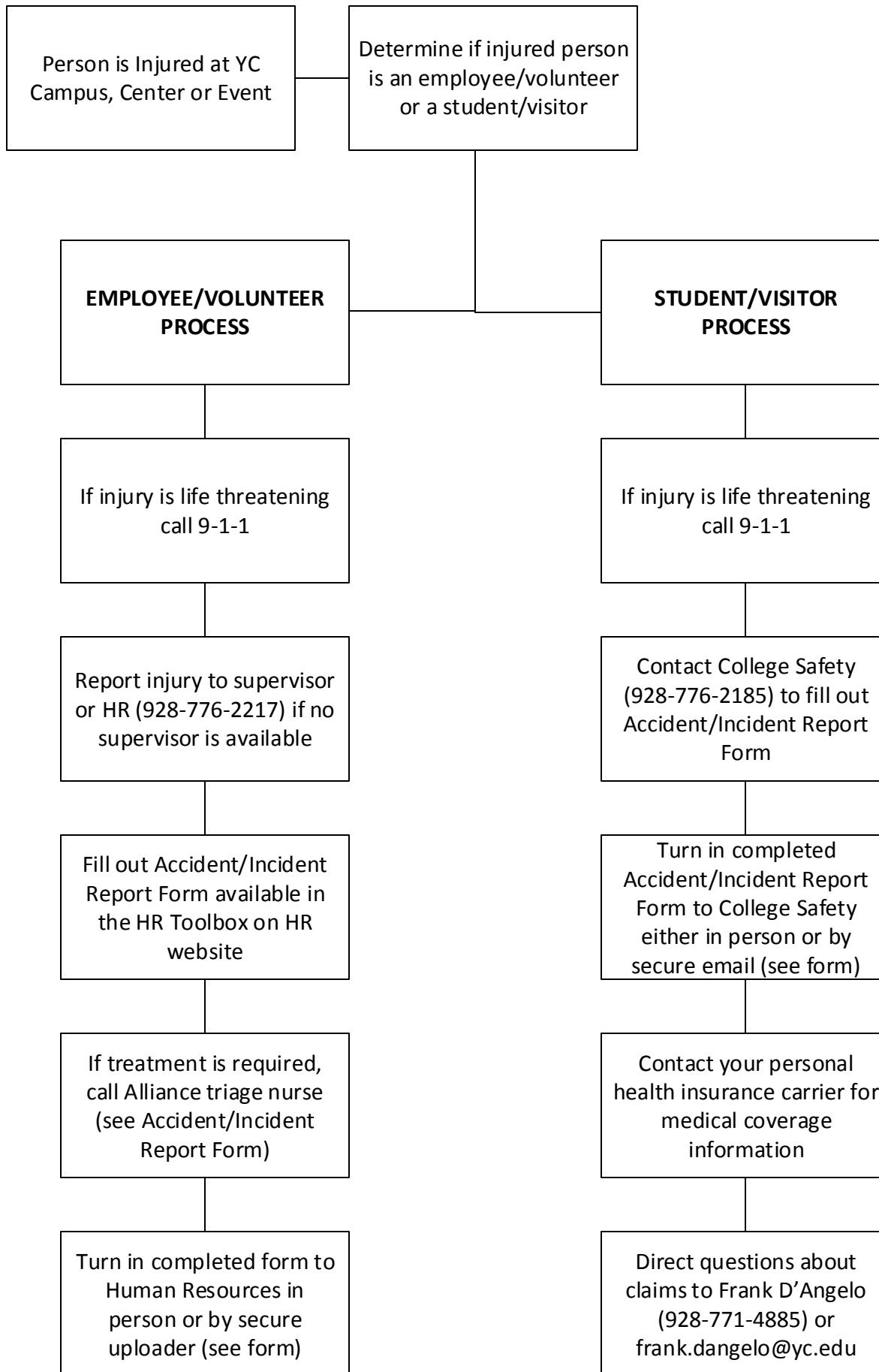
Please note while the College does consider the status of local school districts in its decision, Yavapai College's response is independent of other schools or businesses.

Because many staff, faculty, and volunteers travel from afar, closures and delays apply to all campuses and centers district-wide (if the Prescott Campus is closed, so is the Verde Valley Campus, the Sedona Center, etc.).

In all closure and delay situations, the announcement will be posted on the College's website at YC.EDU and shared with local media. Mobile text alerts will be issued to those who have registered to receive alerts: [alertYC Text Message Sign-up Page](#).

Accident/Injury Flow Chart

August 5, 2020



Q & A: Accident/Incident & Workers' Compensation Guidelines

What do I do if I have an accident/incident or injury on campus?

- Report your injury immediately to your supervisor
- If life-threatening, call 911 (College Police is automatically notified)
- All injuries are to be documented by you and your supervisor by completing the Accident/ Incident Report Form (**following page**)

- If your supervisor is not available, contact College Police x2185 and/or Human Resources x 2217 for assistance.
- All injuries must be reported, and forms completed within 24 hours from the time of injury, even if medical treatment is not used.
- **Employee/Volunteer** Accident/Incident Reports - Send to Human Resources via secure email.
- **Student/Visitor** Accident/Incident Reports - Send to **College Police**.

What if I need medical attention?

- If you sustained an on-the-job injury, and your injury is not life threatening or does not require immediate medical attention, meet with your supervisor and contact the Alliance on-call triage nurse. 1(888) CLAIM-89 or (1.888.252.4689) Press 2 for the on-call triage nurse.
- You may obtain the *initial* medical evaluation from one of these local authorized treatment locations:

Authorized Treatment Centers	Location	Phone Number
NextCare Urgent Care	450 South Willard, Suite 120 Cottonwood, AZ 86326	(928) 634-2574
NextCare Urgent Care	3051 N. Windsong Drive Prescott Valley, AZ 86314	(928) 772-3336
NextCare Urgent Care	2062 Willow Creek Road Prescott, AZ 86301	(928) 443-5103
NextCare Urgent Care	2530 Arizona 89A Sedona, AZ 86336	(928) 203-4813

- For medical treatment outside of the Tri-City area in Yavapai County, go to the nearest emergency location; however, you may be required to go to a designated provider at a later date.

ACCIDENT/INCIDENT REPORT FORM

SECTION I – PERSONAL INFORMATION OF INJURED	Today's Date _____
ARE YOU EMPLOYED BY YAVAPAI COLLEGE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES – <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> STUDENT EMPLOYEE IF YOU ARE NOT EMPLOYED BY YAVAPAI COLLEGE, WHAT IS YOUR STATUS? <input type="checkbox"/> STUDENT ONLY <input type="checkbox"/> VISITOR <input type="checkbox"/> VOLUNTEER <input type="checkbox"/> OTHER EMPLOYEES & VOLUNTEERS, EMAIL COMPLETED FORM TO HUMANRESOURCES@YC.EDU WITH subject: Accident Report Form [Last Name, First Name] /Encrypt STUDENTS & VISITORS, EMAIL COMPLETED FORM TO CAMPUSPOLICE@YC.EDU WITH subject: Accident Report Form [Last Name, First Name] /Encrypt	
LAST NAME: _____	FIRST NAME: _____ MI: _____
ADDRESS (STREET, PO BOX, CITY, STATE, ZIP) _____	
DATE OF BIRTH: _____	HOME PHONE: _____
EMERGENCY CONTACT INFORMATION NAME: _____	PHONE: _____
SECTION II – EMPLOYEE INFORMATION (IF APPLICABLE)	
NORMAL WORKING HOURS: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM TO _____ <input type="checkbox"/> AM <input type="checkbox"/> PM	NUMBER OF DAYS PER WEEK USUALLY WORKED: _____
EMPLOYEE DEPARTMENT: _____	POSITION: _____ WORK PHONE: _____
SECTION III – ACCIDENT/INCIDENT INFORMATION	
DATE OF ACCIDENT/INCIDENT: _____ TIME OF ACCIDENT/INCIDENT: <input type="checkbox"/> _____ AM <input type="checkbox"/> _____ PM	
DID THIS HAPPEN: <input type="checkbox"/> COMING INTO WORK <input type="checkbox"/> DURING WORK HOURS <input type="checkbox"/> LEAVING WORK <input type="checkbox"/> OTHER _____	
LOCATION OF ACCIDENT/INCIDENT: _____	
WHICH CAMPUS: <input type="checkbox"/> CHINO VALLEY <input type="checkbox"/> CTEC <input type="checkbox"/> PRESCOTT <input type="checkbox"/> PRESCOTT VALLEY <input type="checkbox"/> SEDONA <input type="checkbox"/> VERDE VALLEY <input type="checkbox"/> OTHER	
DID INJURED PERSON SEEK MEDICAL ATTENTION: <input type="checkbox"/> Yes <input type="checkbox"/> No DID INJURED PERSON GO TO EMERGENCY ROOM: <input type="checkbox"/> Yes <input type="checkbox"/> No	
WHERE DID INJURED PERSON SEEK MEDICAL ATTENTION – PROVIDE NAME AND ADDRESS OF PHYSICIAN OR OTHER HEALTH CARE PROFESSIONAL _____	
IF HOSPITALIZED, HOSPITAL NAME: _____	
TYPE OF ACCIDENT/INCIDENT: _____ PART OF BODY INJURED: _____ <input type="checkbox"/> RIGHT <input type="checkbox"/> LEFT	
Describe what happened (use back of sheet for additional information): _____ _____	
WITNESS TO ACCIDENT/INCIDENT: _____ PHONE: _____	
WEATHER CONDITIONS AT TIME OF ACCIDENT/INCIDENT: _____	
ACCIDENT/INCIDENT RELATED TO: <input type="checkbox"/> FLOORING/SURFACE <input type="checkbox"/> LIQUID/VAPORS <input type="checkbox"/> WEATHER/NATURE <input type="checkbox"/> OTHER _____	
SIGNED BY: INJURED PERSON'S SIGNATURE (PRINT & SIGN): _____ DATE: _____	
SIGNED BY: SUPERVISOR'S SIGNATURE: (PRINT & SIGN) _____ DATE: _____	
WAS COLLEGE POLICE CALLED TO THIS ACCIDENT/INCIDENT: <input type="checkbox"/> YES <input type="checkbox"/> NO	
Employees and Volunteers, email completed form to AskHR@yc.edu with subject: Accident Report Form [Last Name, First Name] /Encrypt Students and visitors, email completed form to CampusPolice@yc.edu with subject: Accident Report Form [Last Name, First Name] /Encrypt	

Who is my workers' compensation insurance carrier?

- ☐ The Alliance
P.O. Box 33037 Phoenix AZ 85067
- ☐ Policy NO.: 1963-SA-AZ-228
- ☐ Phone:1(888) Claim-89 or (1.888.252.4689)

How do I fill out my portion of the Workers' and Physician's Report of Injury?

- ☐ The form provided by the treatment center needs to be accurately completed and signed. This is your application for workers' compensation insurance benefits, so make sure your physician files your claim promptly.
 1. Request that your physician immediately send the required reports to the Industrial Commission (ICA) and to The Alliance
 2. Provide your supervisor and HR with all work status/work release reports from the treatment center immediately.
 3. If your work release includes modified light duty, the College will attempt to find modified light duty within your department or elsewhere and may be at a reduced wage. When a modified duty position is available with the College and within your limitations, you must accept the position or face losing monthly compensation benefits.
 4. If you require other medical services such as x-rays, laboratory tests or drugs, be sure to provide the medical providers with the name of the workers' compensation insurance company (Alliance) and your employer (Yavapai College).
 5. Remain in the state of Arizona and under the treatment of your doctor unless you obtain written permission from the Industrial Commission of Arizona (ICA) to leave the state for a period exceeding two weeks. You also need permission to change doctors, which can be done by contacting your claims adjustor at The Alliance or calling the ICA.

Who can I contact if I have more questions?

- Human Resources:
Phone: (928) 776-2217
Email: AskHR@yc.edu
- The Alliance:
Phone: 1(888) Claim-89 or (1.888.252.4689)

Separation from the College

A volunteer wishing to cease their service to the College should give a week's notice in writing to the manager.

Once notified, the manager must complete and email a notice of separation form to HR, linked below:

[Notice of Separation](#)

A manager may designate a delegate to perform the on-boarding process and serve as a volunteer's supervisor.

Please note that the separation checklist can be found in the HR Toolbox.