School Year 2019-2020





IMPORTANT V.I.P. INFORMATION

The School Year 2019-20 Teen V.I.P. Program is available to teens, ages 11-17 years old, who are interested in volunteering in programs and services that are helpful to their community. We look forward to providing teens with exciting and educational leadership opportunities.

Application Process

Each teen interested in volunteering must complete the attached application. In order to participate, the following forms must be signed by a parent/legal guardian and returned with the application: Emergency Medical Release, Behavior Policy, Fingerprinting form, and the Parent Authorization Pick-Up Notice. Please review the age requirement and job description for each volunteer activity and select assignments from the list provided before selecting activities.

Turn in the completed application, along with your **\$15.00** registration fee, to the Agoura Hills Recreation and Event Center. Applications will be accepted throughout the school year.

As required by law, those new to the program need to be fingerprinted **before their first scheduled shift** (form & more information included in packet on pgs. 5-6). Fingerprinting is free to you through our suggested Live Scan agency.

Teen Membership

When signing up for Teen V.I.P., you will also receive a complimentary Teen Membership. This membership gives you access to all the Teen Trips, Workshops, Teen Nights & Hangout. This membership is valid through June 12, 2020.

Orientation Meeting

Teens are required to attend a **MANDATORY** orientation meeting with a City of Agoura Hills staff member. At this meeting, teens will receive a program manual and T-shirt. Teens will not be able to start volunteering until they attend an orientation meeting.

TINY TOT DAY CAMP *AGES 11-13

You can help facilitate our day camp for toddlers ages 3-5! Tiny Tot Day Camp is a good match for "tweens" ages 11 to 13 years old. Volunteers interested in this position should be prepared to get their hands dirty in art projects and move around with the kids! Hardworking and helpful volunteers are perfect for the job. **Location:** Recreation Center, Classroom A

Activity Name	Day	Date(s)	Time	Positions Available
Tiny Tot: Winter	M/F	12/23-12/27	8:30am-12:45pm	2 per day
Break Camp		12/30-1/3		
Tiny Tot: Spring	TBD	4/13-4/17	8:30am-12:45pm	2 per day
Break Camp				

REC CLUB DAY CAMPS *AGES 13-17

REC Club is a day camp for kids, ages 5-11, held during holiday breaks at the Agoura Hills Recreation & Event Center. Volunteers will help facilitate art projects, indoor and outdoor games, and will work alongside camp counselors. This is a great job for mature teens that want to learn leadership skills in a fun group environment.

Location: Recreation Center, Classroom C					
Activity Name	Day	Date(s)	Time	Positions Available	
Rec Club: Fall	M/W	11/25-11/27	9am-12:30pm or	4 per day (2 per shift)	
Break Camp	,	,,	12:30-4:00pm		
Rec Club: Winter	M/Th/F	12/23-12/27	9am-12:30pm or	4 per day (2 per shift)	
Break Camp		12/30-1/3	12:30-4:00pm		
Rec Club: Spring	TBD	4/13-4/17	9am-12:30pm or	4 per day (2 per shift)	
Break Camp			12:30-4:00pm		

TPAC (TEEN PLANNING AND ADVISORY COMMITTEE)*AGES 11-13 (Middle School)

The City of Agoura Hills TPAC (Teen Planning Advisory Committee) intend to provide opportunities for youth to move through their teen years connected to their community and its values. Upon applying for the position, you will also be asked to fill out a supplemental questionnaire followed by an interview with City Staff. **Location:** Recreation Center

	Activity Name	Day	Date(s)	Time	Positions Available
N	Ionthly Meetings	F	Ongoing	4-5pm	10 TPAC Members

TEEN COALITION*AGES 14-17 (High School)

Are you interested in making a difference in the community? Apply for this advisory group and give a voice to the teens and youth of Agoura Hills. Not only will you provide services to the community, you will also develop personal leadership skills. This is a year round opportunity. Your commitment on the teen coalition will include an introduction to leadership, monthly meetings, and participation in city activities and special events. Upon applying for the position, you will also be asked to fill out a supplemental questionnaire followed by an interview with City Staff. **Location:** Recreation Center

Activity Name	Day	Date(s)	Time	Positions Available
Monthly Meetings	M/W	Ongoing	6-7pm & as necessary	10 Teen Coalition Members

OFFICE WORK *AGES 13-17

Work at the front desk of the Agoura Hills Recreation and Event Center! You will help us with a variety of projects, from filing paperwork and greeting customers to helping set up for recreation classes. You will get hands-on experience in a real office setting! **Location:** Recreation Center

Activity Name	Day	Date(s)	Time	Positions Available
Front Desk	M/W/F	8/19-6/1	3:00-6:00pm	1 per day

*Days and times are subject to change

Tutoring *AGES 13-17

Do you excel in a specific subject in school? Do you want to help others excel too? We are looking for tutors to help middle & high school students on Mondays at the Teen Center.

Location: Teen Center

Activity Name	Day	Date(s)	Time	Positions Available
Tutoring	М	2019-20 School Year	3:00-5:30pm	1-2 per day

SPECIAL EVENTS *AGES 11-17

Help us run our annual special events! Special Events require a lot of "behind the scenes" work, and we would love to have your help! Events range from Art Shows to Reyes Adobe Days. **Location:** Recreation & Event Center, Parks, etc.

Activity Name	Day	Date(s)	Time	Positions Available Per Shift
Cultural Arts Events (ex: Student Art Show, etc.)	TBD	TBD	TBD	1-3 per event
Reyes Adobe Days	W-Sun	10/10-10/13	Times Vary	Varies based on activity/area



VOLUNTEER PROGRAM

ACKNOWLEDGEMENT OF WORKERS' COMPENSATION

As a volunteer for the City of Agoura Hills, although you are not an employee of the City of Agoura Hills, you are covered under the City of Agoura Hills' workers' compensation plan. The City of Agoura Hills adopted a resolution extending workers' compensation coverage to certain volunteers in specified categories pursuant to Labor Code Section 3363.5. As a volunteer, you are covered under the City of Agoura Hills's workers' compensation plan, which entitles you to exclusive remedy for any injury suffered while performing said volunteer duties.

Here is a section of the resolution for your reference:

City of Agoura Hills, Los Angeles County, California Resolution 91-691 states:

Now, therefore be it resolved that the City Council of the City of Agoura Hills does hereby:

- 1. Find and determine that the public interest is best served by providing workers compensation coverage for city volunteers as specified by the City Manager, and
- 2. Provide eligibility for said volunteers for workers compensation benefits which will be applicable during the time the person actually performs volunteer services, provided, however, that the rights of volunteers shall be limited as set forth in the labor code.

If you have any questions regarding the program, please contact Celeste Bird, Administrative Analyst, at (818) 597-7306.



FINGERPRINTING

As required by law, those new to the program need to be fingerprinted **before their first scheduled shift**. Fingerprinting is free through our suggested Live Scan agencies listed below. Teens must bring the **completed form** on the next page, their **Birth Certificate** and a **School ID/Government issued photo ID** to one of the Live Scan offices.

Postal Annex

5737 Kanan Rd Agoura Hills, California 91301 Phone: (818) 707-9197 Appointments and walk-ins

ACCU-PRINTS

301 Science Dr. Suite 132 Moorpark, CA 93021 (805) 529-5288 Appointments and walk-ins

The Live Scan Agency

29134 Roadside Drive Ste. 106 Agoura Hills, CA 91301 (310) 529-1827 www.livescanagent.com Appointment only



REQUEST FOR LIVE SCAN SERVICE

Print Form

rm Reset Form

Applicant Submission				
A1734	Volunteer			
ORI (Code assigned by DOJ)	Authorized Applicant Type			
Volunteer Type of License/Certification/Permit <u>OR</u> Working Title (Maximum 30 character	ers - if assigned by DOJ, use exact title assigned)			
Contributing Agency Information:				
City of Agoura Hills	00187			
Agency Authorized to Receive Criminal Record Information	Mail Code (five-digit code assigned by DOJ)			
30001 Ladyface Court Street Address or P.O. Box	Celeste Bird Contact Name (mandatory for all school submissior	20)		
		15)		
Agoura HillsCA State91301CityZIP Code	(818) 597-7306 Contact Telephone Number			
Applicant Information:				
Last Name	First Name	Middle Initial Suffix		
Other Name (AKA or Alias) Last	First	Suffix		
Date of Birth Sex Male Female	Driver's License Number			
	Billing			
Height Weight Eye Color Hair Color	Number 100229 (Agency Billing Number)			
Place of Birth (State or Country) Social Security Number	Misc. Number <u>N/A</u> (Other Identification Number)			
Home				
Address Street Address or P.O. Box	City	State ZIP Code		
Your Number: N/A OCA Number (Agency Identifying Number)	Level of Service: 🛛 DOJ 🔀 FBI			
If re-submission, list original ATI number: (Must provide proof of rejection)	Original ATI Number	-		
Employer (Additional response for agencies specified by statute	э):			
Employer Name	Mail Code (five digit code assigned by DOJ)			
Street Address or P.O. Box				
City State ZIP Code	Telephone Number (optional)			
Live Scan Transaction Completed By:				
Name of Operator	Date			
Transmitting Agency LSID	ATI Number Amount Co	llected/Billed		
ORIGINAL - Live Scan Operator SECOND COPY - Ap				

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Teen V.I.P. 2019 Fall Volunteer Application

Volunteer Name:			
Address:			
City:		Zip Code:	
Home Phone:		Cell Phone:	
Volunteer Email:		DOB:	Age:
Grade & School:		Are you a returning VIP?	
Parent/Guardian:		Parent Email:	
Address:			
City:		Zip Code:	
Phone Number:		Cell Number:	
Emergency Contact:	Phone Number:	Relationship:	

*Email will be the main form of communication. Be sure to put email addresses that you can check daily.

Age group(s) you would most like to work with:					
□Tot (3-5) □Youth (6-10) □Teen (11-17) □Adult (18+) □Older Adult/Senior (50+)					
How did you learn about the V.I.P. Teen Volunteer Program?					
What size t-shirt do you wear (adult sizes)? 🗆 Small					
Why do you want to be a Teen Volunteer?					



Date:	March 1, 2019
То:	The Parent(s) and/or Guardian(s) of Teen Volunteers
From:	Celeste Bird, Administrative Analyst
Subject:	Fingerprinting of Teen Volunteers

Please be informed that State law mandates criminal record checks for public recreation staff (full-time, part-time, volunteer and contract), including **fingerprinting**, if they work with minors, children under the age of 18 years old. Under current law, working with minors means direct contact with minors; or in a position of supervisory or disciplinary authority over minors. (Reference: California Education Code § 10911.5 or California Public Resources Code § 5164). In addition, a supplemental application asking if the individual has been convicted of certain specified offenses is required before the first day of service.

Therefore, prospective Teen Volunteers must be fingerprinted. There is no minimum age requirement for volunteers to be fingerprinted. The City of Agoura Hills will not allow any Teen Volunteer into the field without fingerprint clearance.

If you have any questions or concerns, please the Agoura Hills Recreation and Event Center at (818)597-7361.

Parent Name (Please Print)

<mark>Signature</mark>



CITY OF AGOURA HILLS PARENT AUTHORIZATION PICK-UP NOTICE

I understand that as a part of the City of Agoura Hills Department of Community Services "Teen V.I.P Program" I must inform staff if anyone other than myself will be picking up my child/children. The following people are the only people that I permit to pick up my child/children. I understand that if someone **NOT** listed on this form tries to pick up my child/children, "City of Agoura Hills" staff will **NOT** allow my child/children to leave the site without a written notice signed by me.

Volunteer Name:

Name	Relationship to Child	Contact Phone Number

Please circle Yes or No to the following statements:

If no, please explain _____

Parent/Guardian Signature	<mark>Date</mark>



City of Agoura Hills - Department of Community Services Parent General Release, Waiver and Indemnity Agreement EMERGENCY MEDICAL RELEASE

CHILD NAME:			AGE:	
First	Last			
NAME OF PARENT/GUARDIAN:				
	First		Last	
ADDRESS:				
Street		City	Zip	
HOME PHONE:	WORK:		CELL:	
CHILD'S PHYSICIAN:			PHONE:	
EMERGENCY CONTACTS OTHER TH	AN PARENT/GUARDI	<u>AN</u> :		
NAME:		PHONE NUMBER(5):	
NAME:		PHONE NUMBER(5):	
Are there any medical or physical c	onditions (including	allergies) of the ch	ild that we should be made aware of?	_
("Child") and t	hat I am entitled to his c	, certify that I or her custody and con	am the parent or legal guardian of (insert nam trol and I do hereby give my permission for t	the Child to
engaging in the Program. I further certify her while participating in the Program. Sec Section 3 In consideration of permitting t executors, administrators, and assigns) to volunteers) from any and all liabilities, clain Program, whether or not the liability, clain agents, employees, or volunteers). Section indemnify, defend, and hold harmless the or or actions for personal injury, property dat or not the liability, claim, or action arises of or volunteers). Section 5 I understand the	that the Child is in good tion 2 I realize that, by p the Child to enroll in and release, discharge, waive ms and actions for persor n, or action arises out of <u>n 4</u> I further agree (on b City of Agoura Hills (and in mage, or wrongful death out of negligence or careled dangers incidental to pard d. I have read this Gene	health and has no physicarticipating in this Prog articipating in this Prog diparticipate in the Prog , and relinquish the Cit nal injury, property dam negligence or careless rehalf of myself, the Cit ts officers, agents, emp which arise out of or me essness on the part of t rticipating in the Progra- ral Release, Waiver an	nclude preparing for, traveling, receiving instru- sical or other impediment, which would endar gram, the Child will be exposed to a risk of injur ogram, I agree (on behalf of myself, the Child y of Agoura Hills (and its officers, agents, empl- nage, or wrongful death which arise out of or re- ness on the part of the City of Agoura Hills (or hild, my heirs, executors, administrators, and loyees, and volunteers) from any and all liabilit elate to the Child's participation in the Program the City of Agoura Hills (or its officers, agents, e am. I have discussed the dangers of the Program d Indemnity Agreement and am fully aware of may be needed for my child.	nger him or ry or death. d, my heirs, loyees, and elate to the its officers, assigns) to ties, claims, m, whether employees, am and the

Parent or Guardian: _____



Agoura Hills Recreation Department Behavior Policy

It is our goal to provide a safe, positive and fun experience for all participants in our programs. In order to achieve this goal, the following program policies must be followed:

Expected Behavior

- Be respectful and courteous to staff.
- Be respectful of the feelings of others.
- Participate in planned activities.
- Follow instructions and rules given by staff.
- Exhibit and maintain positive attitudes toward the environment and facilities.
- Exhibit and maintain respect for all property, facilities and equipment, both public and private.
- Adhere to all rules and regulations.

Unacceptable Behavior

- Vandalism. Damaging city property or the property of others.
- Theft. Stealing property or equipment of others.
- Abusive language, swearing or profanity. No profanity, vulgar language or swearing. This also includes abusive language (i.e. name calling, etc.), obscene gestures and threats of injury towards others.
- Fighting. No physical fighting (i.e. pushing, shoving, hitting, etc.). If you have a problem with others in the program, discuss the problem with Staff. If a fight breaks-out, the participants (including anyone who encourages the fighting) will be subject to immediate suspension.
- **Touching.** Our recreation program policy is one of "hands-off." Holding hands, arm-in-arm, hugging and kissing are not appropriate. Sexual harassment or indecency will not be tolerated.
- Alcohol, Drugs, Tobacco and other Substances. Taking, distributing, or possessing illegal drugs or tobacco is prohibited and is grounds for immediate suspension. Permanent felt pens, aerosol spray cans of any type, glue and whiteout are not to be brought.
- Weapons or Dangerous Objects. Possession of any firearm, knife, explosive or other dangerous object is prohibited and is grounds for immediate suspension.

Discipline Policy

Except as indicated above, consequences for misbehavior are usually progressive and reflect the severity of the unacceptable behavior. Notwithstanding, one severe act could lead to expulsion from our programs. Any criminal act will be reported immediately to law enforcement officials.

Listed below is a progression of discipline:

- First Offense: Parent/guardian notification; Warning; Time out from group/Loss of privileges (period of time to be determined by incident and age of participant)
- Second Offense: Parent/guardian notification; Time out from group/loss of privileges (period of time to be determined by incident and age of participant); Parent/guardian notified to pick up participant from program; possible suspension
- Third Offense: Parent/guardian notification; Suspension; Expulsion; Parent/guardian notified to pick up participant from program
- Note: No refund will be given if a participant is suspended or expelled from the program.

I HAVE READ THE BEHAVIOR CODE AND FULLY UNDERSTAND ITS CONTENT AND AGREE APPROPRIATE CONSEQUENCES WILL BE GIVEN IN THE EVENT I D	
Participant Signature:	Date
Parent Signature:	Date



2019 Activity Selection

Name:	Age:
What is the FIRST date you are available to volunteer? :	
What is the LAST date you are available to volunteer? :	

Referring to the activities listed in this packet, list the activities you would like to work this year - in order of priority.

***Note:** putting down an activity does not guarantee there will be positions available.

List the Activity name with the dates and times preferred, or if no preference, write "Open".

1. Activity:	Dates/Times:	
2. Activity:	Dates/Times:	
3. <u>Activity:</u>	Dates/Times:	
4. <u>Activity:</u>	Dates/Times:	
5. <u>Activity:</u>	Dates/Times:	
6. <u>Activity:</u>	Dates/Times:	

Please list vacation dates and/or other foreseeable schedule conflicts:

Date (To)	# of Day(s)	OR # of Week(s)
	Date (To)	Date (To) # of Day(s)