Volunteers In Parks Program
Orientation Checklist

Volunteer______________________________________________________ Date__________________

District/Sector/Park Unit _____________________________________________________________

___ Review and sign Volunteer Registration documents listed on Volunteer Service Agreement Checklist (DPR 208K)

___ Discuss volunteer’s duty statement, including essential functions related to the assignment

___ Discuss volunteer’s duty schedule, including lunch and break times

___ Present overview of history, philosophy, and mission of California State Parks

___ Explain general functions and purpose of the park unit (flow chart of org., district, unit, etc.)

___ Introduce park unit’s General Plan, Management Plan, Interpretive Plan, if appropriate

___ Review volunteer standards of conduct and conflict of interest policies (DAM 0260.6)

___ Explain workers’ compensation and tort liability for long-term volunteers

___ Complete self-training manual “Protecting Privacy in State Government” (www.privacy.ca.gov)

___ Discuss Department Discrimination Complaint Program

___ Discuss Department policies related to workplace violence (DAM 0250.11), sexual harassment, and accessibility (Parks Accessibility Guidelines)

___ Review district/unit safety procedures; discuss DPR Safety, Injury & Illness Prevention Program (DAM 1215); Cal/OSHA Reporting Requirements; Volunteer Protective Equipment (DAM 1220.3)

___ Review appearance standards (grooming, uniforms, period clothing, etc.)

___ Introduce volunteer to CSP staff

___ Provide tour of the unit’s facilities

___ Provide initial training

___ Explain unit practices and procedures (obtaining supplies, vehicle/equipment operation, telephone and computer use, etc.)

___ List all state property issued (keys, uniforms, books, etc.) on DPR 175

___ Ensure that volunteer knows whom to contact when he or she has additional questions

___ Other ____________________________________________________________________________

___ Other ____________________________________________________________________________

Supervisor/Lead person completing checklist_______________________________________________

Date orientation completed______________________________________________________________

(Place signed copy of Orientation Checklist in volunteer file.)