VOLUNTARY SERVICES LEAVE

The University of Massachusetts Amherst offers its eligible full-time employees the benefit of Voluntary Services leave (VSL), as an addition to our University Employee Benefits Program. Voluntary Services Leave allows a full-time employee to volunteer during their normal working hours, up to one full workday per month in a Massachusetts public school or school district. The following Guidelines have been provided by the President’s Office of the University of Massachusetts.

VOLUNTARY SERVICES LEAVE GUIDELINES

Section 31E of Chapter 29 of the Massachusetts General Laws authorizes state employees to volunteer up to one work day per month in a public school or school district. The following are intended to provide implementation guidelines for this program at the University of Massachusetts.

ELIGIBILITY
All full time benefited employees who have been employed by the University for 6 months, have received acceptable performance evaluations and have received the approval of their supervisor are eligible.

DEFINITIONS
Public School: any school or school system in the Commonwealth funded through Chapter 70 of the General Laws.

School Volunteer Services: Voluntary services performed in compliance with this program that are performed during an employee’s regular working hours, approved by the supervisor, and which assist in the improvement of public schools or the education of schoolchildren. Examples could include serving on a board or committee, assisting a teacher, computer assistance, or tutoring.

PROCEDURES
An eligible employee must receive the prior approval of his/her supervisor, identify a public elementary, secondary, or vocational school where the employee would like to volunteer, and arrange with the school or district for a program of volunteer services which could be provided during the normal work day. The total time spent in a volunteer capacity shall not exceed one work day per month, including travel time to and from the school.
NOTE: No employee should engage in activities without proper training or skills. No employee should engage in activities prohibited by the State Ethics Commission. No employee should serve in the capacity of a substitute teacher as part of this program.

The employee must complete the Request form and submit it to his/her supervisor. Supervisors shall approve or deny the request depending on the needs of the department and compliance of the request with theses guidelines. Decisions of the supervisor shall not be grievable.

An employee whose request is approved may be required to attend an orientation program conducted by the school district where he/she is volunteering or by the state office coordinating this program.

DOCUMENTATION

An employee must submit a completed Verification Form for each occasion he/she participates in the leave program. The forms will be maintained within each department and departments will be responsible for reporting VSL time via the Weekly Time & Attendance Report.

EMPLOYEE STATUS

An employee who is granted paid release time to volunteer in this program shall not be considered to be acting within the scope of employment for the purposes of Chapter 152 of the general laws. The University shall not be liable for any acts or omissions of said employee while released for volunteer purposes.

Requisite forms should be available within your department or may be obtained from the Human Resources Employee Service Center, 325 Whitmore Administration Building.

For further information, please contact the Total Compensation Unit at 545-0380 or 545-6115.
VOLUNTARY SERVICES LEAVE PROGRAM REQUEST FORM

Campus  University of Massachusetts Amherst

Department/Unit

Name

School/District

Address

School Liaison

School Telephone

DESCRIPTION OF SERVICES


HOURS AND DAYS OF LEAVE

Day  Hours of Leave


Signature of Supervisor  ____________________________  Date  ___________

Signature of Department Head  ____________________________  Date  ___________

_ (Appointing Authority)
VERIFICATION OF SCHOOL VOLUNTEER SERVICES

Name of Volunteer

______________________________________________________________

Campus

______________________________________________________________

University of Massachusetts Amherst

Department/Unit

______________________________________________________________

This is to certify that the above-named employee of the University of Massachusetts Amherst provided the following volunteer services:

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to __________________________ School/District for ________ hours on ___________.

(date)

Signature

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Title

______________________________________________________________

Print Name

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Date

______________________________________________________________

Address

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Telephone

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