

# Mentor/Volunteer Program

1. **Purpose**

## This manual sets forth policy for the COM Mentoring Program in keeping with the Governor’s Mentoring Initiative and describes procedures for all COM associates’ participation.

1. **Authority**

Authority for the provisions of this manual is contained in Chapter 110, Florida Statutes, and Chapter 60K-5, Attendance and Leave, Florida Administrative Code.

1. **Department Policy Statement**

The Department of Commerce supports the Governor’s Mentoring Initiative, which:

* is built on the foundation that education is the most important opportunity we offer children, and
* provides for community service programs that meet child, elder, or human needs.

1. **Definitions**
2. Activities – Community-based services and programs that serve child, elder or human needs. Following are examples:

Mentoring, tutoring, guest speaking or other related services for a school district at the direction of a volunteer coordinator for an established school mentoring program. Coaching for local school or community youth recreational programs; programs designed to build and strengthen the character and competence of youth such as Big Brother/Big Sister; or programs designed to protect children such as Guardian Ad Litem.

Participating in programs serving the elderly; programs that provide relief of human suffering and poverty; adult literacy programs; job training or other services for disabled persons; and public health and welfare programs.

1. Administrative Leave – An authorized leave of absence with pay that is not charged against an associate’s accrued leave credits. Administrative leave counts as hours of pay, but does not count as hours of work for overtime purposes.
2. Aggregate Use – The combined use of up to five hours of administrative leave to be used at one time when participating in a specific volunteer activity or special event during a calendar month.
3. Associate – An employee of the Department of Commerce.
4. Department – Department of Commerce (COM).
5. Flextime – A variable work schedule of 8 hours other than the normal 8 a.m. to 5 p.m. schedule. Associates may begin work as early as 7 a.m. and work as late as 6 p.m.
6. Mentoring Program – A State-sponsored program which provides services to schools and community-based organizations.
7. Rest Break – A period of short duration not to exceed 15 minutes which may be granted to an associate during the first and second half of the work shift. Rest breaks are considered as hours of work.
8. Supervisory Discretion – An option of the supervisor to approve or deny a request for administrative leave for participation in the Mentoring Program.
9. **Registration**

An associate interested in participating in the Mentoring Program must complete the following steps in the registration process before participation begins:

1. Inform his or her immediate supervisor of an interest to participate. Supervisory approval must be obtained.
2. Contact the agency’s Mentoring Program Coordinator, Louise Mondragon (850-245-7177 or Louise.Mondragon@commerce.fl.gov). The coordinator will provide an information packet that will include the following:

* COM Form MP-1, Registration and Training Certification.
* COM Form HRM-57, Volunteer Certification for Administrative Leave.
* Instructions for completion of necessary forms.

1. The associate will complete Part I of COM Form MP-1 (See Attachment 1) and ensure that the supervisor and organization representative complete Parts II and III.
2. Each Educational Institution/Community Service Organization may require a criminal background check on the potential participant.

If it was not a term and condition of employment with COM, this background check will not impact an associate’s employment.

1. **Training/Orientation**

a. Certification.

1. (1) The Educational Institution/Community Service Organization is required to
2. provide training or orientation to each associate, outlining volunteer
3. responsibilities.

1. If the Educational Institution/Community Service Organization has not established a training program, a representative of the organization should meet with the associate and explain the volunteer duties and requirements.
2. Upon completion, the organization’s coordinator must complete Part III of COM Form MP-1, certifying the completion of the training or orientation process.

b. Use of Leave.

1. Time spent in required training or orientation shall be charged to administrative leave for the purpose of the Mentoring Program. Should the required time exceed one hour, the associate shall be allowed to aggregate the use of up to five hours of administrative leave for this purpose.

If administrative leave was used in the aggregate, the associate shall be required to wait a specific number of weeks before volunteer activities can begin. See Section 8.a.(4) of this manual section.

1. COM Form HRM-57, Volunteer Certification for Administrative Leave, (See Attachment 2) must be completed for time spent in training and orientation. This document is also used for volunteer activities as outlined in Section 8.b.(2) of this manual section.

The associate is responsible for coordinating the completion of COM Form HRM-57 with the organization’s coordinator and must submit the completed form at the end of the leave period to his or her supervisor.

**7. Registration Documentation**

Upon completion of registration and training/orientation, the associate must submit the original COM Form MP-1 to the agency’s Mentoring Coordinator. This information shall be used for tracking and statistical purposes.

The associate shall also provide a copy of the Form MP-1 to his or her supervisor. With supervisory approval, participation may begin.

After review for completeness, the department’s Coordinator shall provide a signed copy of the Form MP-1 as follows:

* To the associate
* To the Organization
* To HRM

Should it be necessary for the department’s Coordinator to return the Form MP-1 to the associate for completion, and/or discontinue or delay an associate’s participation, notice must also be provided to the contacts outlined above and the associate’s supervisor, as necessary.

**8. Administrative Leave**

Administrative leave used for participation in the agency’s Mentoring Program shall count as hours of pay, but not as hours of work for overtime purposes.

If an associate is required to work extra hours during any leave period where administrative leave is used, such leave usage shall be offset against the number of extra hours worked.

1. Use of leave.

In granting administrative leave for any purpose under this section, the supervisor shall take into consideration the impact of such leave on the associate’s work unit.

1. Each associate may be granted up to one hour of administrative leave per week, not to exceed five hours per calendar month including, but not limited to the following school or community voluntary activities:
2. Mentoring, tutoring, guest speaking and, participating in an established mentoring program serving a school district, providing related services at the direction of the program or volunteer coordinator.
3. Participating in community service programs that meet child, elder, or human needs. Examples: Guardian Ad Litem, Big-Brother/Big Sister, Senior Corps, and Adult Literacy.

(2) If the actual volunteered time is less than one hour, the associate shall be allowed to use the remainder of the hour to assist with travel. Any additional time needed must be covered by the associate’s personal leave, leave without pay, or as outlined in (3) below.

Because administrative leave is not accrued, the associate is not entitled to use the remaining time to volunteer on another workday during the same workweek.

(3) At the discretion of the immediate supervisor, the associate may work a flexible schedule to assist with additional time needed for travel. Such schedule may include:

* Earlier arrival to work.
* Later departure from work.
* Working through lunch break.
* Taking a reduced lunch break.
* Working on normal days off.

At no time shall rest breaks be accumulated, combined, or used for the volunteer period or travel.

(4) The supervisor may approve the aggregated use of up to five hours of administrative leave in any calendar month, for participating in the Mentoring Program. In such cases no further administrative leave under the Mentoring Program shall be granted until one week has elapsed for every additional hour taken in the aggregate. See example below:

**EXAMPLE:**

|  |  |  |
| --- | --- | --- |
|  | February | March |
| 1st week | 4 hour(s) used | 1 hour(s) used |
| 2nd week | 0 | 4 |
| 3rd week | 0 | 0 |
| 4th week | 0 | 0 |
| 5th week | 1 | 0 |

### When an associate aggregates hours at the end of one month, he or she must then wait a specific number of weeks to be eligible for more administrative leave under the Mentoring Program. See example below:

**EXAMPLE:**

|  |  |  |
| --- | --- | --- |
|  | November | December |
| 1st week | 0 hour(s) used | 0 hour(s) used |
| 2nd week | 0 | 0 |
| 3rd week | 0 | 0 |
| 4th week | 0 | 0 |
| 5th week | 4 | 4 |

1. If the actual volunteered time used in the aggregate is less than the period originally scheduled by the organization, the associate shall be allowed to use a reasonable portion of the remaining scheduled time for travel. Any additional time needed must be covered by the associate’s personal leave and/or leave without pay.
2. At the discretion of the immediate supervisor, the associate may work a flexible schedule to assist with additional time needed for travel as outlined in Section 8.a.(3) above.
3. If an associate does not use administrative leave as authorized in this section, the associate shall not accrue or be paid for such leave.
4. Procedures for requesting leave.

Upon reasonable notice, an associate may be allowed to use administrative leave as provided in this manual section, unless work-related factors make approval inadvisable.

1. Each associate must provide certification of all volunteer activities from the organization for each monthly leave period by completion of COM Form HRM-57. The associate must ensure that Parts II and III are properly completed and certified prior to submission to supervisor.

(2) The original HRM-57 must be submitted to the associate’s supervisor at the end of each monthly leave period. **Failure to do so shall result in the absence(s) being charged to annual leave, compensatory leave, and/or leave without pay.**

**9. Maintenance.**

In order to provide proper accounting of all COM Mentoring Program activities, the procedures outlined below must be followed:

(1) The agency’s Mentoring Coordinator shall maintain a file that includes official registrations, training/orientation certifications, and other pertinent information regarding associates’ approved participation.

The Mentoring Coordinator shall provide a quarterly report of all the department’s activities to the Director’s Office and Office of the Governor. This report shall include the following:

* Name of Department
* Name of person completing status report with contact information
* Number of associates mentoring/volunteering
* Administrative leave hours used
* Location(s) where associates are serving/volunteering
* Best Practices
* Stories of Note

(2) A copy of the associate’s original HRM-57 must be submitted to the agency’s Mentoring Coordinator at the end of each monthly leave period. This document must be submitted even if the administrative leave used is offset due to extra hours of work.

Upon receipt of the proper documentation, HRM shall certify the administrative leave used and enter the number of approved hours into the COPES System. A copy of the HRM-57 shall be submitted to the department’s Mentoring Coordinator for additional tracking purposes.

(3) Should administrative leave be used in violation of the State rule, HRM shall make necessary amendment(s) to the cost center’s Monthly Absence Report(s). A copy of the amended report(s) and a written explanation shall be provided to the associate’s immediate supervisor. The department’s payroll office shall be notified of any amendment(s) resulting in leave without pay.

HRM shall establish and maintain an individual administrative leave file of each participating associate’s activities to ensure that such leave is used appropriately.

1. **Abuse or misuse of Program.**

If, as the result of an investigation, it is determined that an associate has engaged in activities that are in violation of the Mentoring Program’s intent, he or she shall be subject to the following:

* Shall no longer be allowed to participate in the Program,
* Must repay any compensation received in violation; and
* Shall be subject to disciplinary action in accordance with

COM policy.

1. **Forms Availability.**

All COM forms are available on the Intranet or by e-mailing the Mentoring Coordinator.

FLORIDA DEPARTMENT OF COMMERCE

**VOLUNTEER CERTIFICATION for ADMINISTRATIVE LEAVE**

Associate: Please submit this form to your supervisor at the end of each monthly leave period. Supervisor: Please submit this form the department’s Mentoring Coordinator after approval.

**Please print or type:**

# Part I – Associate and Supervisor Information

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Social Security Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Division/Bureau \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cost Center Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Telephone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SUNCOM \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor’s Telephone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Part II – Organization Information

Name of Organization\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Coordinator/Representative \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Log of Associate’s Volunteer Participation:**

Date Time In Time Out Hours Initials

\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

# Part III – Certification

I certify that the above associate volunteered at this organization on the dates and times listed above.

Coordinator/Representative \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

# Part IV – For Human Resource Management (HRM) Use Only

[ ] Approved Per Criteria [ ] Disapproved Per Criteria

HRM Representative Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COM Form HRM-57 (Revised 07/2023) See reverse side for instructions

### INSTRUCTIONS

Use this form to document Administrative Leave used for training/orientation and the performance of volunteer service hours. Use a separate form for each monthly leave period and for each separate volunteer organization.

ASSOCIATE’S RESPONSIBILITIES

Fill out each section completely.

* Part I (Associate and Supervisor Information).
* Part II (Organization Information). Ask the organization’s coordinator/representative to complete the appropriate section.

Document, under “Log of Associate’s Volunteer Participation,” the Date, Time In, Time Out, and Hours you participated. Have the organization coordinator/representative initial each time that you participate.

* Part III (Certification). Sign and date, and have the organization coordinator/representative also sign and date during your last visit to the organization within each monthly leave period.
* Submit original form to your supervisor at the end of each monthly leave period.

SUPERVISOR’S RESPONSIBILITIES

* Attach this form and a copy of the associate’s Time Direct timesheet at the end of each monthly leave period and send to:

#### **Florida Department of Commerce**

**Louise Mondragon, Mentoring Coordinator**

**107 East Madison Street**

##### **Suite 100, Caldwell Building**

**Tallahassee, FL 32399-4122**

##### **Telephone: (850) 245-7177**



Be a big help. Be a mentor.