

VICTOR VALLEY COMMUNITY COLLEGE DISTRICT

VOLUNTEER FORM

Volunteer: Complete the top portion of this form and return it to the department where you will be volunteering. *Keep the attached information sheet* - it advises you of your rights under Worker's Compensation. You are not authorized to begin volunteering until you clear fingerprints and are Board approved.

NAME: (please print) _____

SOCIAL SECURITY NUMBER: XXX-XX- _____ **BIRTHDATE:** _____
(If less than 18 years of age, must present high school diploma or work permit)

ADDRESS: _____

TELEPHONE: _____

Have you ever been convicted of a felony or, within the last ten years, a misdemeanor which resulted in imprisonment?

Yes ____ (explain) _____ No ____

I, the undersigned, affirm that I have received information on procedures and requirements regarding Worker's Compensation coverage. I understand that I am not authorized to begin volunteer work at VVCCD until I am clear fingerprints and receive Board approval.

Volunteer's Signature

Date

(a new Volunteer Form must be completed and signed at the beginning of each calendar and each fiscal year)

~~~~~  
**Department Approval**

**DEPARTMENT:** \_\_\_\_\_ **PROPOSED DATES OF SERVICE:** \_\_\_\_\_  
(May not start prior to Board approval; must submit new Volunteer Form at the beginning of each calendar and each fiscal year)

**Description of Duties to be Performed:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**1. Requestor** \_\_\_\_\_ **Date** \_\_\_\_\_

\_\_\_\_\_  
**2. Dean Approval** \_\_\_\_\_ **Date** \_\_\_\_\_

\_\_\_\_\_  
**3. VP Approval** \_\_\_\_\_

\_\_\_\_\_  
**Date** \_\_\_\_\_

~~~~~  
Instruction Approval

(only if volunteer is serving in Instructional capacity)

V.P. of Student Learning

Date

~~~~~  
**Office of Human Resources**

\_\_\_\_\_  
**Date Board Approved**

\_\_\_\_\_  
**FP Clearance**

\_\_\_\_\_  
**HR Authorized Start Date**

# new hire pamphlet

## If a work injury occurs

California law guarantees certain benefits to employees who are injured or become ill because of their jobs.

Any job related injury or illness is covered. Types of injuries include, but may not be limited to, strains, sprains, cuts, cumulative or repetitive traumas, fractures, illnesses and aggravations. Some injuries from voluntary, off duty, recreational, social or athletic activity may not be covered. Check with your supervisor or Keenan & Associates if you have any questions.

All work related injuries must be reported to your supervisor immediately. Don't delay. There are time limits. If you wait too long, you may lose your right to benefits. Your employer is required to provide you a claim form within one working day after learning about your injury.

It is a misdemeanor for an employer to discriminate against workers who are injured on the job or who testify in another employee's case. Any such employee may be entitled to compensation, reinstatement and reimbursement for lost wages and benefits.

## Workers' compensation benefits include

**Medical Care** – All medical treatment, without a deductible or dollar limit. For dates of injury on or after 1/1/04 there is a limit of 24

chiropractic, 24 physical therapy and 24 occupational therapy visits. However this limit does not apply for post surgical treatments. Costs are paid directly by Keenan & Associates, through your employer's workers' compensation program, so you should never see a bill.

If emergency treatment is required go to the nearest emergency room or contact 911.

Keenan & Associates will arrange medical treatment, often by a specialist for the particular injury. Preferred Provider Networks may be utilized for physicians as well as medical care centers.

If you have health care coverage you are eligible to treatment with your personal physician or medical group should you become injured on the job. If you are eligible, **before you are injured**, you must notify your employer **in writing** and provide your employer **written** documentation from your personal physician or medical group that they agree to be predesignated. Your personal physician must be your regular primary care physician who previously directed your medical treatment, who retains your medical history and records. You may only predesignate your primary care physician if they are a family practitioner, general practitioner, board certified or board eligible internist, obstetrician-gynecologist, or pediatrician. Your personal physician may be a multispecialty medical group composed of licensed doctors or osteopathy providing medical services predominantly for non-occupational illness and injuries.

Your employer may be using a Medical Provider Network (MPN), which is a selected group of health care providers to provide treatment to

workers injured on the job. If you have predesignated a personal physician prior to your work injury, then you may receive treatment from your predesignated doctor. If you have not predesignated and your employer is using and MPN, you are free to choose an appropriate provider from the MPN list after the first medical visit directed by your employer or Keenan & Associates. If you are treating with a non-MPN doctor for an existing injury, you may be required to change to a doctor within the MPN. For more information, see the MPN contact information on reverse side.

If your employer **does not** participate in a Medical Provider Network (MPN) you may be able to change your treating physician to your personal chiropractor or acupuncturist. Generally your employer, or Keenan, has the right to select your treating physician within the first 30 days after your employer knows of your injury or illness. After your employer, or Keenan, initiates treatment you may, upon request, have your treatment transferred to your personal chiropractor or acupuncturist. To be eligible you must notify your employer **in writing prior to being injured**. However, a chiropractor cannot be your treating physician after receiving 24 chiropractic office visit.

Your employer will provide you with a form to use an optional method to predesignate your personal physician.

Contact Keenan & Associates if you plan to change physicians at any time.

**Payment for Lost Wages** - If you're temporarily disabled by a job injury or illness, you'll receive tax-free income until your doctor says you are able to return to work. Payments are two-thirds of your average weekly pay, up to

a maximum set by state law. Payments aren't made for the first three days unless you are hospitalized in an inpatient basis or unable to work more than 14 days.

If the injury or illness results in permanent disability, additional payments will be made after recovery. If the injury results in death, benefits will be paid to surviving, eligible dependents.

**Rehabilitation – For dates of injury on or after 1/1/04 -** you may be entitled to a **Supplemental Job Displacement Voucher**, which entitles you to a voucher for educational training.

### MPN Information

Harbor Health Systems MPN Contact  
(888) 626-1737  
[MPNcontact@harborsys.com](mailto:MPNcontact@harborsys.com)

### How to obtain additional information

Contact your employer representative or Keenan & Associates if you have questions about workers' compensation benefits. You may also contact an Information and Assistance Officer at the State Division of Workers' Compensation. You can consult an attorney. Most attorneys offer one free consultation. If you decide to hire an attorney, his or her fee will be taken out of some of your benefits. For names of workers' compensation attorneys, call the State Bar of California at 415-538-2120.

### Department of Workers' Compensation Information and Assistance Offices

You can get free information from a state Division of Workers' Compensation Information & Assistance Officer. The phone numbers are listed below. Hear recorded information by calling toll-free 800-736-7401 or visit [www.dwc.ca.gov](http://www.dwc.ca.gov).

|                 |              |
|-----------------|--------------|
| Anaheim         | 714-414-1804 |
| Bakersfield     | 661-395-2514 |
| Eureka          | 707-441-5723 |
| Fresno          | 559-445-5355 |
| Goleta          | 805-968-4158 |
| Long Beach      | 562-590-5001 |
| Los Angeles     | 213-576-7389 |
| Marina Del Rey  | 310-482-3858 |
| Oakland         | 510-622-2861 |
| Oxnard          | 805-485-3528 |
| Pomona          | 909-623-8568 |
| Redding         | 530-225-2047 |
| Riverside       | 951-782-4347 |
| Sacramento      | 916-928-3158 |
| Salinas         | 831-443-3058 |
| San Bernardino  | 909-383-4522 |
| San Diego       | 619-767-2082 |
| San Francisco   | 415-703-5020 |
| San Jose        | 408-277-1292 |
| San Luis Obispo | 805-596-4159 |
| Santa Ana       | 714-558-4597 |
| Santa Rosa      | 707-576-2452 |
| Stockton        | 209-948-7980 |
| Van Nuys        | 818-901-5367 |

### Keenan & Associates adjusting locations

**Keenan & Associates  
Claims Processing Unit  
PO Box 2707  
Torrance, CA 90509**

**Torrance**  
800-654-8102

**Eureka**  
707-268-1616

**Pleasanton**  
925-225-0611

**Rancho Cordova**  
800-343-0694

**Redwood City**  
650-306-0616

**Riverside**  
800-654-8347

**San Jose**  
800-334-6554

Anyone who knowingly files or assists in the filing of a false workers' compensation claim may be fined up to \$150,000 and sent to prison for up to five years.  
[Insurance Code Section 1871.4]