COUNTY OF SAN DIEGO
VOLUNTEER REPORT FORM
PERIOD JULY 1, 2015 - JUNE 30, 2016
Deadline: July 15, 2016

1. **DEPARTMENT INFORMATION:**

   Department: **Housing and Community Development**

   Division/Unit: **Community Development**

2. **VOLUNTEER PROGRAM BENEFITS:**

   a. GENERAL VOLUNTEERS (this section should include community volunteer, student intern, groups, corporations, etc.).

No. of Vol.	Hours	X	$23.56 =	$0.00

   Types of work performed by GENERAL VOLUNTEERS in this category:

   b. INSTITUTIONAL VOLUNTEERS (this section should include honor camp inmates, PIC/RETC, GAIN, etc.)

No. of Vol.	Hours	X	$23.56 =	$0.00

   Types of work performed by INSTITUTIONAL VOLUNTEERS in this category:

c. SPECIALIZED VOLUNTEERS (this section should include utilization of Special Volunteers in positions requiring specific skills and/or expertise levels, for example, an attorney, physician, sports figure or celebrity). These specialized positions have verifiable compensation levels (VCL). If you have such a volunteer, please indicate the position, hours and compensation level

Position	Hours	X	VCL	=	Dollar Benefit
Consultant	205		$75.00		$15,375.00
					$0.00
					$0.00
					$0.00
					$0.00

No. of Vol.	Total Hours	205	Total Value =	$15,375.00

Types of work performed by SPECIALIZED VOLUNTEERS in this category:

1. Support the region to meet HEARTH Act compliance
2. Convene sessions to conduct RCCC business per HEARTH Interim Rule and provide community conversations including the development of agendas and minutes

   A. Convene bi-monthly general membership sessions to conduct RCCC business.

   B. Provide or coordinate training sessions with experts for the RCCC as determined by the full body of members. Examples of training topics include Annual Performance Report (APR) preparation; CoC program compliance; fiscal tracking requirements; accessing mainstream resources; and changes in HUD program requirements.
3. Act as technical advisor to the RCCC as it relates to the CoC program and homeless issues.
4. Attend and provide technical assistance as requested by the RCCC membership at regional coordinating and planning efforts or other community activities.
5. Respond to requests for technical advice to the RCCC as it relates to the CoC program and homeless issues.

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

	No. of Volunteers	Hours	Dollar Benefit
2a.	0	0	$0.00
2b.	0	0	$0.00
2c.	1	205	$15,375.00

Total Vol.	1	Hours	205	Total Value =	$15,375.00

3. DONATIONS TO VOLUNTEER PROGRAM:

Please list all donations to the department's Volunteer program including monetary donations and tangible/intangible items. Items such as computers, air time, transportation, books, etc. Please assign a fair market value to each and add to the total value of the donations section.

Item Donated: _____   Value: _____
Item Donated: _____   Value: _____
Item Donated: _____   Value: _____
Item Donated: _____   Value: _____
Item Donated: _____   Value: _____

TOTAL VALUE =	$0.00

4. VOLUNTEER PROGRAM COSTS:

a. Cost of supervision of volunteers (total hours of direct supervision multiplied by the hourly rate of staff person (s) directly supervising program volunteers.)

Hours [   ] X Rate [   ] = [$0.00]

b. Cost of program coordination (total hours of program coordination multiplied the hourly rate of coordinator(s)). This section should include coordination of staff, compiling statistics, job description preparation, volunteer placement, recognition, etc.)

Hours [   ] X Rate [   ] = [$0.00]

c. Other program costs (volunteer training materials/supplies, recognition costs, etc.):

Item	Cost
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL OF OTHER PROGRAM COSTS   =   [$0.00]

d. TOTAL OF VOLUNTEER PROGRAM COST   =   [$0.00]
(add 4a, 4b, and 4c)

5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:

a. Total Dollar Benefits of Volunteers, Item 2d (Page 2) $15,375.00
b. Total of Donations to Volunteer Program, Item 3 (Page 2) $0.00
c. Subtract Total of Program Costs, Item 4d (Page 3) $0.00

TOTAL PROGRAM BENEFIT $15,375.00

6. RECRUITING:

Please describe your recruiting programs:

7. SPECIAL VOLUNTEER PROGRAM ACTIVITIES/ACHIEVEMENTS:

Please describe any special activities and/or achievements your program was involved in during the period of this report:

8. **VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2016-17:**

Please describe your program goals. Include activities, number of volunteers, recruitment, training, recognition and other goals:

9. **GENERAL INFORMATION:**

Name of person completing report: Lois Towler

Phone: 858-694-8750   Mail Stop: O-231   E-Mail: lois.towler@sdcounty.ca.

Volunteer Coordinator: Jennifer Busskohl

Phone: 858-694-4887   Mail Stop: O-231   E-Mail: jennifer.busskohl@sdcou

10. **DEPARTMENT CERTIFICATION:**

DEPARTMENT HEAD SIGNATURE   7-15-16
                                 DATE

17 8