# University of California, San Diego Department of Family Medicine & Public Health



# Volunteer Appointment with the UCSD Student-Run Free Clinic

rease complete.	
Name:	
Address:	
E-mail(s):	
Phone number(s):	
<b>Emergency Contact:</b>	Name:
	Phone:
Free Clinic Site:	
Volunteer Role:	
Lead Position (Y/N):	

Volunteeer Coordinator: Lisa Deferville

Program Director: Ellen Beck, MD

Division: Family Medicine – UCSD Student-Run Free Clinic Project

## **Summary of Position:**

Plasse complete.

A volunteer in the Department of Family Medicine and Public Health to provide services to UCSD Student-Run Free Clinic Project at UCSD Student-Run Free Clinic sites or other sites as needed. More specific details of individuals position noted on the Health Sciences Volunteer Agreement Form.



### **Volunteer Appointment Form**

First and Last name		Middle
Citizenship Status (Required): Citizen:	Yes 🛄 No 🛄 🛛 Visa Statu	s (if applicable):
UC Student Status (please check)	any near relatives who are UCSD	Are you currently on UCSD pay statu
Registered Not Registered	bloyees:	YesNo
	Joyees.	Date of Birth:
Sex: Male Female		
I am volunteering my services to the University of solely for		se hout promise or expectation of compensation or
University benefits. My volunteer services will no		
understand that I will not displace a regular statu		
Volunteer's Signature		_
	ulled Unit By Department (	niv
10.001	filled Out by Department C	Only
egin Date / End Date	Number of Hours F	Per Week:
egin Date / End Date	Number of Hours F	Per Week:
egin Date / End Date ome Dept Unit Code Home Dept	Number of Hours F	Per Week:
egin Date / End Date ome Dept Unit Code Home Dept epartment Contact	Number of Hours F Name	Per Week:
egin Date / End Date ome Dept Unit Code Home Dept epartment Contact upervisor:	Number of Hours F Name	Per Week:
egin Date / End Date ome Dept Unit Code Home Dept epartment Contact	Number of Hours F Name	Per Week:
egin Date / End Date ome Dept Unit Code Home Dept epartment Contact	Number of Hours F Name	Per Week:

# Describe the training and orientation that the volunteer will recieve:



	UNIVERSITY OF CALIF STATE OATH OF ALLEGIAN	CE. PATENT		EE'S NAME (Last, First,	Middle Initial)	DATE PREPARED Mo/Dy/Yr
	POLICY, AND PATENT ACKNO UPAY585 (R 11/2011) E0420 714		EMPLOY	EE ID	DEPARTMENT	EMPLOYMENT DATE
						Mo/Dy/Yr
the State of C of the State of	TH OF ALLEGIANCE I do soler alifornia against all enemies, foreign a f California; that I take this obligation fi am about to enter.	ind domestic; that I	will bear tr	ue faith and allegiance to	the Constitution of the United	States and the Constitution
Taken and s	ubscribed before me on:			Signature of Officer of	r Employee:	
	Mo/Dy/ Authorized Official:			(Do not s	ign until in the presence of p	roper witness.)
Title:				NOTE: No fe	ee may be charged for admir	nistering this oath.
(Gov. Code S	at be administered by either (1) a personance ec. 1001), Judicial Officers, Justices of members of boards of supervisors, e	of the Peace, and c	ounty officia	als named in Gov. Code	Sections 24000, 24057, such a	as, district attorneys, sheriffs,
University, in or without cor Section 2, Ca All persons re sign a new O	SIGN THE OATH: All persons (other t common with all other California publi npensation, must sign the oath. (Calif. lif. Gov. Code Sections 3100-3102.) e-employed by the University after a te ath if the date of re-employment is mo the previous Oath was signed (Calif.	c employees, whet Constitution, Artic rmination of service re than one year af	her with le XX, e must fter the	be filed with the Campu FAILURE TO SIGN OA subscribing to the Oath no reimbursement for e the Oath or affirmation.	TH: No compensation for serv or affirmation may be paid to expenses incurred may be paid (Calif. Gov. Code Sec. 3107.)	rice performed prior to his a University employee. And I prior to his subscribing to
individual enter Section 3: Ca	I MUST BE SIGNED: The Oath must I ers upon the duties of employment (C lif. Gov. Code Sec. 3102.)			affirmation required by be false, is guilty of per	rrson who, while taking and su this chapter, states as true any jury, and is punishable by imp ore than 14 years." (Calif. Gov.	y material which he knows to risonment in the state prison
This acknowle California, a c my employme of my employ facilities and// University. By execution rights to a per in the Universit I also underst the Policy fror inventors, and govern the Un Further, I ack derived only f 1) a license o agreement lea the percentage funds or from The Policy on the treatment I acknowledge patents that I University em my utilization with my use o University. I fi disclose the o inventions to <b>NOTICE:</b> This	CKNOWLEDGMENT edgment is made by me to The Reger corporation, hereinafter called "Universe ent, and of wages and/or salary to be p ment, by University, and/or my utilizat or my receipt of gift, grant, or contract of this acknowledgment, I understand centage of royalty payments received sity of California Patent Policy, hereina and and acknowledge that the Univer m time to time, including the percentage d that the policy in effect at the time ar niversity's disposition of royalties, if an nowledge that the percentage of ner m to a license or bailment agreem r bailment agreement for licensed righ ading to a license or bailment agreem any other consideration of any kind re Accepting Equity When Licensing Ur of equity received in consideration for e my obligation to assign, and do here conceive or develop 1) within the cou ployment while employed by Universi of any University research facilities, o figift, grant, or contract research fund- urther acknowledge my obligation to p conception and/or reduction to practice the University authorized licensing office acknowledgment does not apply to an i	sity," in part conside paid to me during a ion of University re- research funds three that I am not waivi by University, as s fifter called "Policy." sity has the right to ge of net royalties p invention is disclo y, from that inventi- to alter paid to inve- ey or equity receive ts, or 2) an option ent. I also acknowle ot derived from re- ecceived by the Univ iversity Technology a license. by assign, invention res and scope of me ty, 2) during the cor r 3) through any co s received through report and e of potentially pate ce. Such invention-	eration of ny period search ough the ing any set forth change paid to sed shall on. entors is d under: or letter edge that search versity. y governs ins and by urse of nnection the fully ntable s shall be fies under th	promptly furnish Univer In the event any such in protectable by an analo determination by Univer analogous protection the necessary, at Universite interest therein and to a thereon. The scope of which notice is given be regarding any rights or proceed with any Univer University notice of that above-described docur expenses and costs it de protest is subsequently I acknowledge that I an perform its obligations is said obligations have b University may relinqui- its judgment, the criteric I acknowledge that I an for any period during w of my utilization of any research funds receive In signing this acknowle given below, applies to inventions to the Univer-	Code Sec.2870 which provides t	with respect to each. University to be patentable or ersity desires, pursuant to estherein, to seek patent or cuments and do all things ersity all rights, title, and atent or analogous protection f. Labor Code Sec. 2870, to University's determination owledge my obligation: (a) to assistance; (b) to give cution date of any of the to reimburse University for all ation attempts, if any such esary to enable University to ch or contracting agencies as t to any such invention, if, in een met. employment by University or y invention during the course or any gift, grant, or contract e law, of which notification is d to disclose all my that (a) Any provision in an
employment a invention that inventions tha development require an em	s acknowledgment does not apply to an i greement which provides that an employ the employee developed entirely on his t either: (1) Relate at the time of concept of the employer; or (2) Result from any w ployee to assign an invention otherwise rceable. In any suit or action arising under the second second second second second second the second	vee shall assign, or of or her own time with ion or reduction to p ork performed by th excluded from being	offer to assig out using the ractice of th e employee required to	n, any of his or her rights i e employer's equipment, su e invention to the employer for the employer. (b) To th be assigned under subdivi	n an invention to his or her emplo upplies, facilities, or trade secret 's business, or actual or demons e extent a provision in an employ sion (a), the provision is against	over shall not apply to an information except for those strably anticipated research or yment agreement purports to the public policy of this state
RETENTION: A	Accounting: 5 years after separation,	Employee/Gue	et Namo	(Plages print):		

RETENTION: Accounting: 5 years after separation, except in cases of disability, retirement or disciplinary	Employee/Guest Name (Please print):	)	
action, in which case retain until age 70.	Employee/Guest Signature:		
		Date	

Other Copies: 0-5 years after separation

Witness Signature & University Acceptance:

\_\_Date:\_\_\_

## **UNIVERSITY OF CALIFORNIA PATENT POLICY—October 1, 1997**

#### I. PREAMBLE

It is the intent of the President of the University of California, in administering intellectual property rights for the public benefit, to encourage and assist members of the faculty, staff, and others associated with the University in the use of the patent system with respect to their discoveries and inventions in a manner that is equitable to all parties involved.

The University recognizes the need for and desirability of encouraging the broad utilization of the results of University research, not only by scholars but also in practical application for the general public benefit, and acknowledges the importance of the patent system in bringing innovative research findings to practical application.

Within the University, innovative research findings often give rise to patentable inventions as fortuitous by-products, even though the research was conducted for the primary purpose of gaining new knowledge. The following University of California Patent Policy is adopted to encourage the practical application of University research for the broad public benefit; to appraise and determine relative rights and equities of all parties concerned; to facilitate patent applications, licensing, and the equitable distribution of royalties, if any; to assist in obtaining funds for research; to provide for the use of invention-related income for the further support of research and education; and to provide a uniform procedure in patent matters when the University has a right or equity.

#### **II. STATEMENT OF POLICY**

A. An agreement to assign inventions and patents to the University, except those resulting from permissible consulting activities without use of University facilities, shall be mandatory for all employees, for persons not employed by the University but who use University research facilities, and for those who receive gift, grant, or contract funds through the University. Such an agreement may be in the form of an acknowledgment of obligation to assign. Exemptions from such agreements to assign may be authorized in those circumstances when the mission of the University is better served by such action, provided that overriding obligations to other parties are met and such exemptions are not inconsistent with other University policies.

B. Those individuals who have so agreed to assign inventions and patents shall promptly report and fully disclose the conception and/or reduction to practice of potentially patentable inventions to the Office of Technology Transfer or authorized licensing office. They shall execute such declarations, assignments, or other documents as may be necessary in the course of invention evaluation, patent prosecution, or protection of patent or analogous property rights, to assure that title in such inventions shall be held by the University or by such other parties designated by the University as may be appropriate under the circumstances. Such circumstances would include, but not be limited to, those situations when there are overriding patent obligations of the University arising from gifts, grants, contracts, or other agreements with outside organizations.

In the absence of overriding obligations to outside sponsors of research, the University may release patent rights to the inventor in those circumstances when:

1. the University elects not to file a patent application and the inventor is prepared to do so, or

2. the equity of the situation clearly indicates such release should be given, provided in either case that no further research or development to develop that invention will be conducted involving University support or facilities, and provided further that a shop right is granted to the University.

C. Subject to restrictions arising from overriding obligations of the University pursuant to gifts, grants, contracts, or other agreements with outside organizations, the University agrees, following said assignment of inventions and patent rights, to pay annually to the named inventor(s), or to the inventor(s)' heirs, successors, or assigns, 35% of the net royalties and fees per invention received by the University. An additional 15% of net royalties and fees per inventor's campus or Laboratory. Net royalties are defined as gross royalties and related property rights, maintaining patents, the licensing of patent and related property rights, and such other costs, taxes, or reimbursements as may be necessary or required by law.

Inventor shares paid to University employees pursuant to this paragraph

represent an employee benefit. When there are two or more inventors, each inventor shall share equally in the inventor's share of royalties, unless all inventors previously have agreed in writing to a different distribution of such share.

Distribution of the inventor's share of royalties shall be made annually in November from the amount received during the previous fiscal year ending June 30th, except as provided for in Section II.D. below. In the event of any litigation, actual or imminent, or any other action to protect patent rights, the University may withhold distribution and impound royalties until resolution of the matter.

D. The DOE Laboratories may establish separate royalty distribution formulas, subject to approval by the President. Distribution of the inventor's share of DOE Laboratory royalties shall be made annually in February from the amount received during the previous fiscal year ending September 30th. All other elements of this policy shall continue to apply.

E. Equity received by the University in licensing transactions, whether in the form of stock or any other instrument conveying ownership interest in a corporation, shall be distributed in accordance with the Policy on Accepting Equity When Licensing University Technology.

F. In the disposition of any net income accruing to the University from patents, first consideration shall be given to the support of research.

**III. PATENT RESPONSIBILITIES AND ADMINISTRATION** 

A. Pursuant to Regents' Standing Order 100.4(mm), the President has responsibility for all matters relating to patents in which the University of California is in any way concerned. This policy is an exercise of that responsibility, and the President may make changes to any part of this policy from time to time, including the percentage of net royalties paid to inventors.

B. The President is advised on such matters by the Technology Transfer Advisory Committee (TTAC), which is chaired by the Senior Vice President—Business and Finance. The membership of TTAC includes the Provost and Senior Vice President—Academic Affairs, the Director of the Office of Technology Transfer, and representatives from the campuses, DOE Laboratories, Academic Senate, the Division of Agriculture and Natural Resources and the Office of the General Counsel. TTAC is responsible for:

1. Reviewing and proposing University policy on intellectual property matters including patents, copyrights, trademarks, and tangible research products;

2. Reviewing the administration of intellectual property operations to ensure consistent application of policy and effective progress toward program objectives; and

3. Advising the President on related matters as requested.

C. The Senior Vice President—Business and Finance is responsible for implementation of this Policy, including the following:

1. Evaluating inventions and discoveries for patentability, as well as scientific merit and practical application, and requesting the filing and prosecution of patent applications.

2. Evaluating the patent or analogous property rights or equities held by the University in an invention, and negotiating agreements with cooperating organizations, if any, with respect to such rights or equities.

3. Negotiating licenses and license option agreements with other parties concerning patent and or analogous property rights held by the University.

4. Directing and arranging for the collection and appropriate distribution of royalties and fees.

5. Assisting University officers in negotiating agreements with cooperating organizations concerning prospective rights to patentable inventions or discoveries made as a result of research carried out under gifts, grants, contracts, or other agreements to be funded in whole or in part by such cooperating organizations, and negotiating with Federal agencies regarding the disposition of patent rights.

6. Approving exceptions from the agreement to assign inventions and patents to the University as required by Section II.A. above.

7. Approving exemptions to University policy on intellectual property matters including patents, copyrights, trademarks, and tangible research products.

#### PLEASE SIGN THE STATE OATH and PATENT ACKNOWLEDGEMENT on page 1

# ACKNOWLEDGEMENT STATEMENT UC SAN DIEGO HEALTH CORPORATE COMPLIANCE PROGRAM STANDARDS OF BUSINESS CONDUCT

My signature on this form acknowledges that I have received and agree to read the UCSD Health Sciences Corporate Compliance <u>Standards of Business Conduct</u> (also known as the Code of Conduct Handbook).

I also acknowledge that the Code of Conduct Handbook is only an outline of principles for individual and business conduct and do not, in any way, constitute an employment contract or an assurance of continued employment. A detailed corporate compliance program management manual can be read in my department business office and is available on the Internet (<u>http://health.ucsd.edu/compliance</u>).

I confirm that I have not been excluded by the federal government from participation in any governmental program, nor to the best of my knowledge, have I been proposed for exclusion. I agree to notify the corporate compliance officer or the university's Office of the General Counsel immediately upon my receiving written or verbal notification that I am proposed for exclusion from any governmental health care program.

Name (Please Print)

Signature

Date

Department/Division

Name:

# CHILD ABUSE REPORTING REQUIREMENT EMPLOYEE NOTIFICATION & ACKNOWLEDGEMENT

California state law Section 1165.7 of the Penal Code requires that any person who enters into employment on and after January 1, 1985, as a child care custodian, medical practitioner, or non-medical practitioner, or with a child protective agency, shall be a mandated reporter and prior to commencing employment, shall sign a statement that he or she has knowledge of the provisions of Section 11166 of the Penal Code and will comply with its provisions.

Section 11166 of the Penal Code requires that any mandated reporter such as a child care custodian, medical practitioner, non-medical practitioner, or employee of a child protective agency who has knowledge of or observes a child in his or her professional capacity, or within the scope of his or her employment, whom he or she is reasonably suspects has been a victim of child abuse to report the known suspected instance of child abuse to a child protective agency immediately or as soon as practically possible by telephone, and to prepare to send a written report thereof within 36 hours of receiving the information concerning the incident.

Any person who fails to report an instance of child abuse which he or she knows to exist or reasonably knows to exist, as required, is guilty of a misdemeanor and is punishable by confinement in the county jail for a term not to exceed six months or by a fine of not more than five hundred dollars (\$500) or by both.

The law also provides that a person who does report as required, or who provides a child protective agency with access to a victim, shall not be civilly or criminally liable for doing so.

To view the sections of the Penal Code which cover Child Abuse & Neglect Reporting, go to <u>http://www.leginfo.ca.gov/.html/pen\_table\_of\_contents.html</u>.

# ELDER/DEPENDENT ADULT ABUSE REPORTING REQUIREMENT EMPLOYEE NOTIFICATION & ACKNOWLEDGEMENT

California Welfare and Institutions Code Section 15630 requires that any person who assumes full or intermittent responsibility for the care or custody of an elder or dependent adult, whether or not he or she receives compensation, including administrators, supervisors, and any licensed staff of a public or private facility that provides care or services for elder or dependent adults, or any elder or dependent adult care custodian, health practitioner, clergy member, or employee of a county adult protective services agency or a local enforcement agency, is a mandated reporter and is required to acknowledge understanding of the requirements for reporting.

Mandated reporters who have observed or has knowledge of an incident that reasonably appears to be physical abuse, abandonment, abduction, isolation, financial abuse, or neglect, or is told by an elder or dependent adult that he or she has experienced abuse or reasonably suspects abuse that abuse of an elder or dependent adult has occurs shall report the known or suspected abuse by telephone or through a confidential internet reporting tool immediately or as soon as possible with a written report submitted within two (2) working days.

To view Section 15630 of the California Welfare and Institutions Code, go to <u>http://www.leginfo.ca.gov/cgi-bin/calawquery?codesection=wic</u>.

I certify that I have read and understand the Child Abuse Reporting Requirement and the Elder / Adult Abuse Reporting Requirement and will comply with the reporting requirements expressed above.

Signature:	Date:	

## CONFIDENTIALITY AGREEMENT

Applies to all UCSD Health "workforce members" including: employees, medical staff and other health care professionals; volunteers; agency, temporary and registry personnel; and house staff, students, and interns (regardless of whether they are UCSD trainees or rotating through UCSD Health facilities from another institution).

It is the responsibility of all UCSD Health workforce members, as defined above, including employees, medical staff, house staff, students and volunteers, to preserve and protect confidential employee, patient and business information.

The State Information Practices Act (California Civil Code sections 1798 et seq.) governs the acquisition and use of data that pertains to individuals. All of these laws establish protections to preserve the confidentiality of various personal and medical information and specify that such information may not be disclosed except as authorized by law or the patient or individual. The Federal Health Insurance Portability Accountability Act (HIPAA) Privacy Law, the Confidentiality of Medical Information Act (California Civil Code § 56 et seq.) and the Lanterman-Petris-Short Act (California Welfare & Institutions Code § 5000 et seq.) govern the release of patient identifiable information by hospitals and other health care providers.

#### Confidential Employee and Business Information includes, but is not limited to, the following:

- · Employee home telephone number and address;
- Spouse or other relative names;
- · Social Security number or income tax withholding records;
- · Information related to evaluation of performance;
- Other such information obtained from the University's records which if disclosed, would constitute an unwarranted invasion of privacy; or
- Disclosure of Confidential business information that would cause harm to UCSD Health.

**Confidential Patient Care Information includes:** Any individually identifiable information in possession or derived from a provider of health care regarding a patient's medical history, mental, or physical condition or treatment, as well as the patients and/or their family members records, test results, conversations, research records and financial information. Examples include, but are not limited to:

- Physical medical and psychiatric records including paper, photo, video, diagnostic and therapeutic reports, laboratory and pathology samples;
- Patient insurance and billing records;
- Mainframe and department based computerized patient data and alphanumeric radio pager messages;
- · Visual observation of patients receiving medical care or accessing services; and
- Verbal information provided by or about a patient.

Peer review and risk management activities and information are protected under California Evidence Code

section 1157 and the attorney-client privilege.

I understand and acknowledge that:

- I shall respect and maintain the confidentiality of all discussions, deliberations, patient care records and any
  other information generated in connection with individual patient care, risk management and/ or peer review
  activities.
- It is my legal and ethical responsibility to protect the privacy, confidentiality and security of all employee records/medical records, proprietary information and other confidential information relating to UCSD Health and its affiliates, including business, employment and medical information relating to our patients, members, employees and health care providers.
- 3. I shall only access or disseminate employee/patient care information in the performance of my assigned duties and where required by or permitted by law, and in a manner which is consistent with officially adopted policies of UCSD Health, or where no officially adopted policy exists, only with the express approval of my supervisor or designee. I shall make no voluntary disclosure of any discussion, deliberations, patient care records or any other patient care, peer review or risk management information, except to persons authorized to receive it in the conduct of UCSD Health affairs.
- UCSD Health performs audits and reviews employee/patient records in order to identify inappropriate access.
- My user ID is recorded when I access electronic records and that I am the only one authorized to use my user ID. Use of my user ID is my responsibility whether by me or anyone else. I will only access the minimum necessary information to satisfy my job role or the need of the request.
- 6. I agree to discuss confidential information only in the work place and only for job related purposes and to not discuss such information outside of the work place or within hearing of other people who do not have a need to know about the information.
- 7. I understand that any and all references to HIV testing, such as any clinical test or laboratory test used to identify HIV, a component of HIV, or antibodies or antigens to HIV, are specifically protected under law and unauthorized release of confidential information may make me subject to legal and/or disciplinary action.
- 8. I understand that the law specially protects psychiatric and drug abuse records, and that unauthorized release of such information may make me subject to legal and/or disciplinary action.
- 9. My obligation to safeguard patient confidentiality continues after my termination of employment with the University of California.

I hereby acknowledge that I have read and understand the foregoing information and that my signature below signifies my agreement to comply with the above terms. In the event of a breach or threatened breach of the Confidentiality Agreement, I acknowledge that the University of California may, as applicable and as it deems appropriate, pursue disciplinary action up to and including my termination from the University of California.

Print Name:	Signature:
Department:	Dated:

# UCSD INFORMATION SYSTEMS COMPUTER/INFORMATION USE AND SECURITY STATEMENT

Employee Name:	
Employee ID:	

I understand that in the performance of my duties at UCSD, I must hold information in confidence. I have read and understand the <u>Rules of Conduct for University Employees Involved with Information Regarding</u> <u>Individuals</u> (attached). I understand that unauthorized disclosure of personal/confidential information may result in charges of Invasion of Privacy.

I also understand that it is against UCSD Information Systems policy to seek out or use personal or confidential information relating to others for my own interest or advantage.

I understand that under California State Law any person who maliciously accesses, alters, deletes, damages, or destroys any computer system, network, computer program, or data is guilty of a felony.

I am aware that the <u>References</u> and <u>Related Policies</u> on the attached sheet outline University policies and State and Federal laws which govern use of computer systems and disclosure of information. I understand that failure to comply with the regulations may result in disciplinary action, which could include release from employment. Violation of local, state, or federal statues may carry the additional consequence of prosecution under the law, where judicial action may result in specified fines or imprisonment, or both, plus the costs of litigation or the payment of damages, or both.

I acknowledge upon receipt of a UCSD Administrative Computing & Telecommunications computer access code (userid) and password; and understand that I will be responsible for all entries made thereunder. I understand that my userid and password are to be accorded the same significance as my handwritten signature and that the delegation of userid and password to another person, or my use of another persons userid, may be considered False Representation.

Signature:

Date:

#### RULES FOR CONDUCT FOR UNIVERSITY EMPLOYEES INVOLVED WITH INFORMATION REGARDING INDIVIDUALS

- A. Employees responsible for the collection, maintenance, use and dissemination of information about individuals which relates to their personal life, including their employment and medical history, financial transactions, marital status and dependents, shall comply with the State of California Information Practices Act. <u>PPM-480-3</u> <u>Privacy of and Access to Information, Legal Requirements and Implementing Procedures</u>, shall be used as a basic source of guidance in administering the Act's provisions.
- B. Employees shall not require individuals to disclose personal information which is not necessary and relevant to the purposes of the University or to the particular function for which the employee is responsible.
- C. Employees shall make every reasonable effort to see that inquiries and requests relating to personal records of individuals are responded to quickly and without requiring the individual to unnecessarily repeat his or her inquiry to others. In other words, reasonable efforts will be made to place the responsibility on the Department for responding to the individual after his/her initial contact.
- D. Employees shall assist individuals who seek information pertaining to themselves in making their inquiries sufficiently specific and descriptive so as to facilitate the locating the records.
- E. Employees shall respond to inquiries from individuals, and requests from them to review, obtain copies of, amend, correct, or dispute their personal records in a courteous and business-like manner, and in accordance with PPM-80- 3.
- F. Employees shall not disclose personal and confidential information relating to individuals to unauthorized persons or entities. The intentional disclosure of such information to such persons may be cause for disciplinary action.
- G. Employees shall not seek out or use personal or confidential information relating to others for their own interest or advantage. The intentional violation of this rule may be cause for disciplinary action.
- H. Employees responsible for the maintenance of personal and confidential records shall take all necessary precautions to assure that proper administrative, technical, and physical safeguards are established and followed in order to protect the confidentiality of records containing personal information and to assure that such records are not disclosed to unauthorized individuals or entities.

#### REFERENCES

- A. Policy and Procedure Manual (PPM 480-3) Responsibilities and Guidelines for Handling Records Containing Information about Individuals.
- B. University Policy, Guidelines and Legal Requirements on Privacy of and Access to Information, June9, 1978.
- C. University Policies Applying to the Disclosure of Information from Student Records, February 1, 1977.
- D. California Public Records Act (1976).
- E. California Information Practices Act (1977).
- F. California Education Code, Chapter 1.2, Division 16.5.
- G. California Penal Code, Section 502, Chapter 858, relating to Computer Crime.
- H. Federal Privacy Act of 1974.
- I. Federal Family Educational Rights and Privacy Act of 1974.
- J. Electronic communication Privacy Act of 1986.

#### **RELATED POLICIES**

- A) POLICY AND PROCEDURE MANUAL (PPM)
  - 1) 135-3 Network Security
  - 2) 160-2 Disclosure of Information from Student Records.
  - 3) 230-11 Maintenance of, Access to, and Opportunity to Request Amendment of Academic Personal Records.
  - 4) 230-29 Policies and Procedures to Assure Fairness in the Academic Personnel Review Process.
  - 5) 250-605 Staff Employee Personnel Records.
  - 6) 250-605 (L-1) Staff Employee Personnel Records.
  - 7) 460-5 Misappropriation of University Assets.
  - 8) 480-3 Responsibilities & Guidelines for Handling Records Containing Information About Individuals.
- B) BUSINESS AND FINANCE BULLETIN
  - 1) RMP-8 Legal Requirements on Privacy of and Access to Information.
- C) INFORMATION SYSTEMS POLICIES
  - 1) Misuse of University Resources, 11/2/87.

Participant's name:	

#### Please Print

### UNIVERSITY OF CALIFORNIA, San Diego

Volunteer

### Waiver of Liability, Assumption of Risk, and Indemnity Agreement

Waiver: In consideration of being permitted to participate in any way in

Volunteering time/effort within Health Sciences

hereinafter called "The Activity", I, for myself, my heirs, personal representatives or assigns, **do hereby** release, waive, discharge, and covenant not to sue The Regents of the University of California, its officers, employees, and agents from liability from any and all claims including the negligence of The Regents of the University of California, its officers, employees and agents, resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in The Activity.

Signature of Parent/Guardian of Minor Date

Signature of Participant Date

Assumption of Risks: Participation in The Activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions to 3) catastrophic injuries including paralysis and death.

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in The Activity. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

**Indemnification and Hold Harmless:** I also agree to INDEMNIFY AND HOLD The Regents of the University of California HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement in The Activity and to reimburse them for any such expenses incurred.

**Severability:** The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Acknowledgment of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.



# UNIVERSITY OF CALIFORNIA

# WHISTLEBLOWER HOTLINE 800-403-4744

# universityofcalifornia.edu/hotline

#### What You Can Report:

Any activity by UC or a UC employee that;

- violates University policy
- violates a state or federal law or regulation, such as;
  - corruption
  - malfeasance
  - bribery
  - theft or misuse of government property
  - fraud
  - coercion
  - conversion
- wastes money, or
- involves gross misconduct, gross incompetence, or gross inefficiency.

#### Where To Report:

- Systemwide Whistleblower Hotline 800-403-4744
  - universityofcalifornia.edu/hotline
- The UCSD Local Designated Official for the Whistle-blower and Whistleblower Protection Polices: <u>wbcon-</u> <u>tact@ucsd.edu</u>
- Your Supervisor
- Audit & Management Advisory Services
- Human Resources

#### How To Report:

- In writing or orally
- With as much specific factual information as possible (Report what you know, but don't investigate—leave that to the experts!)
- Anonymously, if preferred

Confidentiality will be maintained, to the extent possible.

#### Protection from Retaliation:

If you believe you have been retaliated against for blowing the whistle on improper activity, you may file a complaint with your Locally Designated Official, your Human Resources Department, your Academic Personnel office or your supervisor.

#### For More Information:

The University's Whistleblower and Whistleblower Protection policies, and additional information, can be found online at <a href="http://www.ucop.edu/uc-whistleblower/">http://www.ucop.edu/uc-whistleblower/</a>.

#### Other Reporting Mechanisms:

- State Auditor's Whistleblower Hotline, at 800-952-5665
  - www.auditor.ca.gov/hotline
- California Attorney General's Hotline, at 800-952-5225

You may also report fraud, waste & abuse involving specific federal programs directly:

- Recovery Act Fraud Hotline (Misuse of Stimulus Spending), at (877) 392-3375
- Department of Defense Hotline, at 800-424-9098
- Department of Homeland Security Hotline, at 800-323-8603
- Rights & Remedies for Whistleblowers under the Federal Acquisition Regulation (FAR) Pilot Program — <u>http://ucal.us/far</u>
- Rights & Remedies for Whistleblowers under the Defense Federal Acquisition Regulation Supplement (DFARS) — <u>http://ucal.us/dfars</u>
- Enhanced Whistleblower Protection under the NASA Federal Acquisition Regulation Supplement (NFS) - <u>http://ucal.us/nasa</u>

I hereby acknowledge that I have received and read University of California's Whistleblower Hotline handout.

Signature Date\_\_\_\_\_

UCSD Pre-Dental Society student-run free dental clinics

UCSD Pre-Dental Society Emergency Contact Form: IN CASE OF AN EMERGENCY, PLEASE CONTACT:

## Volunteer Info:

Name:	
Email:	
Phone:	
Signature:	

**Emergency Contact Info:** 

First Name:	
Last Name:	
Relation:	

Address:	
City:	
State:	
Zip Code:	

Daytime Phone:	
Message or Home Phone:	

# **UCSD Pre-Dental Society Shadow Session:**

This form is REQUIRED when attending a shadow session in any clinic listed below. After attending a shadow session this form must be submitted with your application for processing.

**Volunteer Information:** 

Name: \_\_\_\_\_

Email:

Phone: \_\_\_\_\_

**Training Verification:** 

Manager Name:	
Signature:	
Date of Training:	
Clinic:	<ul> <li>Baker Clinic</li> <li>Downtown Clinic</li> <li>Lemon Grove Clinic</li> <li>Pacific Beach Clinic</li> <li>Veteran's Village Clinic</li> </ul>

# UCSD Pre-Dental Society student-run free dental clinics

# **UCSD Pre-Dental Society Photobook:**

Your photo is REQUIRED for your participation in the UCSD Pre-Dental Society / Free Dental Clinic Project.

### Volunteer Info:

Name:	
Email:	
Phone:	

### **Photographer Info:**

Photographer Name:	
Signature:	
Date Photograph Taken:	

UCSD Pre-Dental Society student-run free dental clinics

# **UCSD Pre-Dental Society MyPDS Registration:**

This form ensures proper registration of your MyPDS account. This account is used for tracking of your involvement in the UCSD Pre-Dental Society. The UCSD Pre-Dental Society does not guarantee tracking of involvement until this account is properly registered.

Registration occurs online, at https://my.ucsdpds.org. Please use the "Register" button at the link above to start. You MAY NOT use an email address registered with an ".edu" ending (e.g: @ucsd.edu).

Volunteer Info:

Name:	
Email:	
Phone:	
Signature:	

#### **Registration Verification:**

Registration Phrase:		