

ANIMAL CARE AND CONTROL

Community Service Starter Packet

- ALL PAPERWORK MUST BE SIGNED, COMPLETED, RETURNED AND APPROVED PRIOR TO STARTING YOUR COMMUNITY SERVICE HOURS AT ANIMAL CARE AND CONTROL.
- THE “HOLD HARMLESS AGREEMENT” MUST BE NOTORIZED.
- A COPY OF YOUR COURT PAPERWORK MUST BE PROVIDED.
- THERE IS A \$10.00 FEE FOR THE COST OF YOUR ID BADGE.
- MUST NEED A MINIMUM OF 25 HOURS.

Attached Documents:

#1 Community Service Application

#2 Hold Harmless Agreement – MUST BE NOTORIZED

#3 Community Service ID Page

#4 Rules of Conduct – Zero Tolerance Policy

#5 Hours of Opportunity

- Once you have completed the attached paperwork and have obtained a copy of your court paperwork... Call (561) 233-1281 to set up an appointment to meet with the Customer Relations Coordinator, Tammy Roberts.



COURT APPOINTED COMMUNITY SERVICE APPLICATION

Public Safety Department
Animal Care and Control Division
7100 Belvedere Road
West Palm Beach, FL 33411
Contact: Tammy Roberts: (561) 233-1281



Must be completed and returned.

Please attach a copy of all Court paperwork regarding probation. If no paperwork is attached, your application will not be accepted.

YOU MUST BE 17 YEARS OR OLDER WITH 25 HOURS OR MORE TO APPLY FOR COURT APPOINTED COMMUNITY SERVICE. LIMITED POSITIONS AND SCHEDULES ARE AVAILABLE.

Application Date: _____

Print Full Name: _____ Age: _____ DOB: _____

Address : _____ City: _____ Zip _____

Phone: (H) _____ (W) _____ (Cell) _____ Other _____

Social Security Number _____

Driver's License Number: _____ State _____

Do you have any relatives that work for Palm Beach County Animal Care and Control? Yes No

If yes, please give name _____

1. Total number of court appointed community service hours required: _____

2. The date in which the community service hours must be completed: _____

3. Please explain why you are required to do your court appointed community service hours. Be specific. This area must be filled out before your application will be considered.

Probation Organization Name: _____ Officer's Name: _____

Probation Officer's Work Number: _____ Probation letter must be attached.

Please write the days of the week and the hours you are available to work. _____

A completed application and copies of probation paperwork **must** be completed and returned to PBC Animal Care and Control Community Service Program, 7100 Belvedere Road, WPB, FL 33411. Documents are verified and the application must be approved by AC&C officials. If approved for work assignment, you will be photographed for an I.D. badge.

Applicant's Signature _____

Date _____

Office Use Only

Approved: Yes _____ No _____

Signature: _____

Date: _____

Background Completed _____

Receipt # for badge _____



**WAIVER OF LIABILITY
& HOLD HARMLESS
AGREEMENT**

I _____ understand and agree that volunteering at the Palm Beach County Division of Animal Care and Control may subject me to various risks and dangers and agree to protect, defend, reimburse, indemnify and hold Palm Beach County, its agents, officers, employees and elected officials harmless at all times from and against all claims, liability, expenses, losses, costs, fines, damages or causes of action of every kind and character, including attorney's fees and costs, whether at trial or appellate levels or otherwise, arising during, as a result of, or in connection with my participation as a volunteer.

I hereby assume the risk of participating as a volunteer at the Palm Beach County Division of Animal Care and Control and hold Palm Beach County, its agents, officers, employees and elected officials harmless at all times from and against all claims, liability, expenses, losses, costs, fines, damages or causes of action of every kind and character, including attorney's fees and costs, whether at trial or appellate levels or otherwise due to their acts, errors or omissions resulting in bodily injury, including death, or damage to my property incident to or in connection with my participation in the volunteer program. Additionally, authorization is hereby given for emergency medical care rendered to me.

I agree to release, indemnify, and defend Palm Beach County and its officials, officers, employees, and agents from and against any claim that I, my parents or legal guardian or any other person may have for any losses, damages, injuries or death arising out of or in connection with my participation in this volunteer program.

I indicate by my signature below that I have read the terms and conditions of participation and agree to abide by them. I have carefully read this Agreement and acknowledge that I understand it. No representation, statements, or inducements, oral or written, apart from the foregoing written statement, have been made. This Agreement shall be governed by the laws of the State of Florida. If any portion of this Agreement is held invalid, the rest of the document shall continue in full force and effect.

Volunteer Name _____
(Please Print)

Signature _____
(Volunteer if over 18 or Parent/Legal Guardian)

Date _____

The forgoing instrument was sworn to or affirmed before me this day ____ of _____ 20____ by _____ who is personally known to me or who has produced _____ as identification and who did (did not) take an oath.

Signature Commission number

Name of Notary – typed



Public Safety Department
Animal Care and Control Division
7100 Belvedere Road, West Palm Beach, FL 33411

COMMUNITY SERVICE SIGNATURE and I.D. PAGE

I, _____ understand that my approval to work as a community service worker at Animal Control is based on a law enforcement background check. I understand that I am receiving an orange ID badge with photo and that I am responsible for this badge until the completion of my hours. I understand that I must return this badge to receive the final documentation of the completion of my hours. I understand that I must wear this ID badge while completing my hours. I understand that I must use the sign-in book when entering the building. I understand that a staff member must sign me in and sign me out of the book. I understand and will follow the dress code or be sent home and not receive any hours for that day.

Cost of ID Badge is \$10.00. Lost/Replacement is \$10.00. This badge is property of ACC and must be returned.



Community Service Signature

Date

Customer Relations Coordinator/ Manager

Date

Receipt # for ID Badge

Staple Copy of
I.D.
HERE



COMMUNITY SERVICE

RULES OF CONDUCT

ZERO TOLERANCE – DISCIPLINARY POLICY

Violations of the rules of conduct will result in your being required to leave the facility, with your Community Service approval status terminated. Please check with the Customer Relations Coordinator if you are not clear on any of the following rules or policies.

DRESS CODE: You will be required to wear appropriate clothing while at our facility. Tee Shirts and Jeans are recommended, and closed toed shoes are required. **Absolutely no short shorts, jeans with holes, or tank tops are allowed.** Community Service Workers are expected to maintain a clean and professional appearance while completing their hours at this facility.

WEAR IDENTIFICATION: Community Service Workers are required to wear their issued ID Badge while working here at this facility.

BE PRODUCTIVE: Loafing, sleeping on the job, or other unproductive use of time is prohibited.

ACT PROFESSIONAL: Horseplay, profanity, fraternizing, fighting, violence or any other action interfering with work of other Community Service Workers, Volunteers, or Employees is prohibited. Working or reporting to work under the influence of drugs or alcohol is prohibited.

SIGN IN/OUT DAILY: Each person is responsible for signing in-and-out each day he/she is scheduled to work and responsible to find a staff to initial and verify time worked. If the hours are not documented, no credit will be given. **If you are found in violation of any of the above rules, you will be terminated and the proper authorities will be notified.**

LETTERS OF COMPLETION: A scheduled appointment is **required** with the Customer Relations Coordinator, for a signed letter upon completion of the required hours. There will be **NO** signed letters given out without a scheduled appointment. Prior notice allows the Customer Relations Coordinator to calculate the hours and prepare the document.

I, _____ have read and understand the rules of conduct as stated in this policy.

SIGNED _____ **DATE** _____



COMMUNITY SERVICE HOURS OF OPPORTUNITY

Palm Beach County Animal Care and Control allows offenders to work their required community service hours at our facility. The hours of opportunity are as follows:

Saturdays 8:00 am – 5:00 pm

Sundays 8:00 am – 4:00 pm

Mondays – Friday 8:00 am – 6:00 pm

- Community Service Workers are not allowed at the facility prior to 8:00 am nor are they allowed at the facility after we close to the public.
- Community Service Workers are not allowed at the facility on County Holidays, without prior arrangements made through the Customer Relations Coordinator.
- Community Service Workers must work a minimum of 4 hours in a shift to receive credit for the time worked.
- Community Service Workers must complete a minimum of 20 hours per month.

I, _____ have read and understand the hours of opportunity as stated in this policy.

SIGNED: _____ **DATE:** _____