



## **Community Service workers at the Humane Society of Forsyth County**

Thank you for choosing or agreeing to do your court mandated community service hours with us! We are grateful to have your help! Please feel free to ask questions of the staff if anything is unclear throughout your time with us.

### **Dress Code:**

For your safety and comfort, we require the following-

- Closed Toed shoes (no sandals)
- Long pants- preferably jeans (NO SHORTS!)
- No low cut shirts- Solid color T-shirt is best.

### **Please follow these guidelines while working with us:**

1. All animals should be handled appropriately and with respect. If you are uncomfortable handling any animal, that's okay! Please ask for assistance. DO NOT handle animals labeled "Employees Handle Only."
2. Cell phones should only be used for emergencies or during breaks.
3. If you smoke, DO NOT throw cigarette butts on the ground. Pocket them or throw them in a garbage can once extinguished.
4. Use appropriate language at ALL TIMES including hours when we are not "open to the public."
5. Follow directions of staff and signs posted throughout the shelter (esp: Do not handle dogs labeled : Employees handle only)
6. Be courteous and polite to any "customers" coming to look at pets or to donate, including those receiving assistance from our food pantry or looking to surrender an animal. Please do not attempt to answer customer's questions, direct them to a staff/regular volunteer who will have accurate information.
7. Radios in the Mitchell and dog buildings should be keep at low volume on an appropriate station during cleaning only (**RADIO SHOULD BE OFF DURING OPEN HOURS**)
8. Headphones and ipods (etc) should only be used during breaks. We need to be able to communicate with you easily so headphones are not allowed.
9. Please park in the spaces to the right along the fence/ bushes as you come in the gate.
10. Lunch breaks are from 12-1pm only. We are closed during this time and you may only stay if approved by the staff on duty.



**Cause for dismissal:**

You will be given only 1 verbal warning, if deemed appropriate. You may be asked to leave for the rest of the day or asked not to return for any of the following reasons:

1. Mistreating the animals- (including verbal abuse, kicking cages...) *Immediate Termination*
2. Stealing anything (incl pet food). Please ask if you need assistance. *Immediate Termination*
3. Taking a dog out labeled **“employees handle only”**
4. Inappropriate dress (see dress code)
5. Not following directions
6. Inappropriate cell phone usage
7. Being intentionally difficult to work with or giving “attitude”

**Acknowledgment and Release of Liability**

I \_\_\_\_\_ have read and understand the guidelines for participating in community service with the Humane Society of Forsyth County. I will follow these guidelines and understand my lack of cooperation will result in dismissal.

I, and my heirs, in consideration of my activity and presence (as community service worker, participant, or volunteer) with the Humane Society of Forsyth County, either at 4440 Keith Bridge Road, Cumming, or elsewhere, hereby release the Humane Society, its Officers, the Board of Directors, and the employees and any other volunteers connected with the Society’s activities, from any and all liability for sickness or injury from whatever source, which might occur while participating in Society activities. Specifically, I release said persons from any liability or responsibility for the actions of any animals that are part of the Humane Society’s programs. I am aware of the risks of participation, which include, but are not limited to, bites by dogs or bites or scratches by cats. I understand although I may be assigned by the County Probation office to work on the Humane Society premises, that my participation in Humane Society’s activities is strictly voluntary, and I freely chose that assignment. I understand that the Humane Society of Forsyth County does not provide medical coverage for me. I verify that I will be responsible for any medical costs I incur as result of my participation.

Participant: \_\_\_\_\_

Parent/ Guardian’s signature if participant is under 18 \_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_