

ANIMAL SERVICES VOLUNTEER APPLICATION



SALT LAKE COUNTY

ANIMAL SERVICES

Date: \_\_\_\_\_ Orientation Date: \_\_\_\_\_

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

Phone numbers:

Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Please list the names and phone numbers of two people we may contact in an emergency;

1.) \_\_\_\_\_

2.) \_\_\_\_\_

How did you find out about the volunteer program at Animal Services? \_\_\_\_\_

Have you ever volunteered before? If so, where and what kinds of jobs/ tasks did you do?

\_\_\_\_\_

Current Employer or School \_\_\_\_\_

What areas are you most interested in volunteering in at the Shelter?

\_\_\_\_\_

What special skills do you possess? \_\_\_\_\_

Which animals do you prefer to work with (please check all that apply):

Cats \_\_\_\_\_ Small Dogs \_\_\_\_\_

Dogs \_\_\_\_\_

Are you interested in helping with events? Yes \_\_\_\_\_ No \_\_\_\_\_

**Please write your initials on the line to the left of each paragraph after you have read it.**

\_\_\_\_\_ I agree that my services as a Salt Lake County Animal Services volunteer are provided on a strictly volunteer basis. I shall receive no pay, benefits, or compensation of any kind from Salt Lake County Animal Services for time.

\_\_\_\_\_ I agree to volunteer in strict compliance with the policies and procedures of Salt Lake County Animal Services.

\_\_\_\_\_ I understand and agree that I am responsible for maintaining the confidentiality of all appropriate and privileged information.

\_\_\_\_\_ I agree to wear a volunteer tee shirt and closed toe shoes and clothes that can get soiled while working in the Shelter or at Animal Services events.

\_\_\_\_\_ I understand the SL County Bite ordinances and will report all bites, without exception. I understand that my failure to do so may result in my termination as a volunteer.

\_\_\_\_\_ Keys and supplies will be returned to the Volunteer Office or a Shelter Supervisor.

\_\_\_\_\_ I understand which animals I am allowed to interact with under new volunteer procedures. I will respect and abide by the staff recommendations and interact with Shelter Animals only as allowed or advised.

\_\_\_\_\_ I will agree to vaccinate my own animals against the following diseases before volunteering:

- Canines are immunized against Canine Distemper, Canine Parvovirus, Parainfluenza, Hepatitis (4 in 1 booster); Bordetella (kennel cough); and Rabies, and are free of parasites.
- Felines are immunized against Feline Panleukopenia, Rhinotracheitis, Calicivirus (3 in 1 booster), Feline Leukemia and Rabies, and are free of parasites.

### **Indemnity**

\_\_\_\_\_ I agree to release, discharge, indemnify and hold harmless Salt Lake County Animal Services, including its agents and employees, for any and all personal injuries or damages to property or pets caused by the shelter animal(s).

\_\_\_\_\_ I recognize that in handling shelter animal(s) there exists a risk of injury including physical harm caused by a shelter animal. On behalf of myself, my heirs, personal representatives, and executors, I release, discharge, indemnify and hold harmless Salt Lake County Animal Services, its agents, volunteers and employees from any and all claims, causes of action or demands, or any nature of cause connected with my volunteer agreement.

\_\_\_\_\_ I understand that public relations are an important part of volunteering in the foster care program. I agree on behalf of myself, my heirs, personal representatives and executors to allow Salt Lake County Animal Services to use any photographs taken of me for use of public relations efforts. Salt Lake

County Animal Services will use reasonable efforts to notify me but such notification is not a condition of its release for public relations purposes.

\_\_\_\_\_ I understand that I may refuse to be photographed and that such refusal shall not change my status as a Salt Lake County Animal Services volunteer.

**I have received, read, and understand the Volunteer Guidelines by Salt Lake County Animal Services.**

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Volunteer

Date

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Volunteer Coordinator

Date



## Salt Lake County Volunteer Contract

If I am accepted as a Salt Lake County Volunteer, I agree to perform the volunteer duties as specified on my selected job description, to the best of my ability and in a professional manner. I will appreciate constructive feedback. If problems arise such as scheduling, I will notify my supervisor as soon as possible before my assigned shift.

### **Confidentiality:**

I agree to maintain the same strict confidentiality regarding my duties that is expected of the paid staff.

### **Release:**

While performing volunteer assignments and duties, the undersigned volunteer (unpaid worker), authorized by the Division Director and shall be deemed an employee of Salt Lake County only for the purpose of the following liabilities and insurance coverage.

- A. Medical benefits under Worker's Compensation for any injury sustained by him/her while engaged in performance of any service.
- B. Properly licensed operation of County vehicles or equipment.
- C. Liability protection normally afforded salaried employees.

If I, as a Salt Lake County volunteer, will be driving on county business or transporting clients while using my personal vehicle, in the event of a car accident, I shall immediately contact my own insurance carrier. If involved in an accident while on County business I must also file a report with County Risk Management according to Salt Lake County Wide Policy 1011, Accident Reporting. Upon request, the Volunteer Coordinator will provide assistance to complete this report. (Refer to Volunteer Policy #4009 on Volunteer Auto Use.) With this knowledge, the undersigned volunteer hereby releases Salt Lake County, its agents and employees from any liability or obligation arising from, or in connection with, the undersigned's volunteer activities with Salt Lake County other than stated above.

I have read the sexual harassment and discrimination information. \_\_\_\_\_(initial)

If necessary, I have submitted a Statutory Ethical and Disclosure form. \_\_\_\_\_(initial)

I have read and understand the above conditions.

Volunteer Signature: \_\_\_\_\_

### **Sexual Harassment and Discrimination Prevention for Volunteer**

Harassment is a form of discrimination which is prohibited by federal law and Salt Lake County policy. Discrimination and harassment on the basis of a person's race, color, religion, national origin, sexual orientation, marital status, or sex is prohibited under County policy. Sexual Harassment is a form of sex discrimination.

Volunteers- sexual harassment or discrimination is not to be taken lightly. Anyone engaging in conduct prohibited by law could be held personally liable.

Sexual Harassment is defined under Federal Law and County Policy 5730 as:

Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when:

1. submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment.
2. submission to or rejection of such conduct by such individual is used as the basis for employment decisions affecting such individual, or
3. such conduct has the purpose or effect for unreasonably interfering with an individual's work performance or creating an intimidation, hostile, or offensive working environment.

The three elements are:

1. The conduct must be of a sexual nature. This means either words, physical contact, or gestures.
2. The conduct must be unwelcome.
3. A job related factor must be present:
  - a) Submission to the unwelcome conduct is a condition of employment.
  - b) Submission to the unwelcome sexual activities results in a positive or negative employment decision.
  - c) The unwelcome sexual conduct may also interfere with work performance and create a hostile, intimidating or offensive working environment.

In summary, sexual harassment is unwelcome sexual conduct that affects the victim's working conditions.

Preventing harassment-

The first line of prevention is to avoid doing or saying anything that might offend someone. The second line of prevention is to report incidents of harassment or discrimination under County Policy. You may report to: any supervisor in your area, the County Mayor, any County Council member, or Utah Antidiscrimination Division.

Salt Lake County will not tolerate any sexual harassment in the workplace and policy provides for immediate investigation with the appropriate discipline for anyone who engages in harassment.