

BALDWIN COUNTY ANIMAL
CONTROL CENTER



VOLUNTEER
HANDBOOK

JULY 2015

WELCOME

On behalf of the Baldwin County Animal Control Center and the Baldwin County Health Department, we would like to extend to you a warm welcome. It is our pleasure to have you share with us your time and service as a volunteer. We hope you have a fulfilling experience as you give of yourself to help us provide care for the pets entrusted to us by our communities.

The Volunteer Handbook will familiarize you with our policies and procedures. Your first responsibility as a volunteer is to read through this handbook. Please let one of our staff know if you have any questions or concerns.

We hope that you find your time volunteering at the Baldwin County Animal Control Center both rewarding and beneficial for you. We know your service will appreciate by our residents and staff.

Sincerely,

VOLUNTEER PROGRAM

MISSION

To protect the public health from zoonotic diseases, such as rabies, as well as to shelter dogs and cats and find homes for them.

Hours of Operation

Monday through Friday 9:00am to 4:00pm
(Closed from 12:00 until 1:00 for lunch)

Saturday Open 1st and 3rd Saturdays only 9:00am to 12:00pm

Closed Sunday and State Holidays (Cleaning / Feeding Only)

Objectives

The Baldwin County Animal Control Center welcomes volunteers who understand and support the mission, purpose, and policies of the shelter. The program allows for volunteers to assist in, but not limited to, the walking of animals, helping to socialize animals to improve their adoptability, bathing and dipping of adoptable animals, and assisting shelter personnel as needed. The primary objectives of the BCACC Volunteer Program is to improve the care and adoptability of the animals housed at the shelter and to provide for a quality experience for the citizens of Baldwin County so they will help create interest and support for the shelter so we can ultimately save the lives of the animals brought to the BCACC from our communities.

VOLUNTEER GUIDELINES

1. All volunteers are to report to the shelter director, manager or receptionist when they arrive at the shelter. At that time you will be instructed as to your assignments for the day.
2. All volunteers must be 18 years or older to volunteer at the Baldwin County Animal Control Center.
3. Volunteers may handle animals ONLY when authorized by the staff person in charge of that particular area of the shelter. Under no circumstances are volunteers to open cages of any animal marked as “RABIES SUSPECT”, “WILD”, “SICK” or “VICIOUS”. Any violation of this rule will mean you no longer may work at this facility.
4. All volunteers are to be supportive of the BCACC and its staff. Any disruptive, negative, or rude behavior will not be tolerated. While you are a volunteer at the shelter you are expected to extend a positive, courteous and friendly attitude to the staff and our patrons.
5. The BCACC does have a dress code. You will be working with dogs, cats and shelter areas so dress appropriately. It is required that you do not wear sandals or open-toed shoes. Shorts, midriff showing tops and T-shirts that are obscene or offensive to others will not be permitted by volunteers or staff at the shelter.
6. The BCACC is not a non-kill shelter. We do euthanize animals when it becomes necessary. Please understand that our mission is to not only protect the public, but also to find caring homes for the animals brought to our shelter.
7. The BCACC is available to the public during the operating hours of 9:00 am until 12:00 pm and from 1:00 pm until 4:00 pm. During this time people come to the shelter for a variety of reasons. Some come to look for a lost animal. Others come to look for a new pet to adopt. It is the responsibility of both the staff and volunteers to show these potential adoptive parents around the facility.

8. The BCACC asks that you be conscience about the cage in which an animal is residing and make certain that the animal is returned to the same cage.
9. Volunteers are to take NO ONE into the stray area UNLESS authorized by the shelter employee to which they are assigned. DO NOT discuss the animals in the stray area with anyone and DO NOT walk or take these dogs or cats out of their assigned space.
- 10.If you see an animal without food, water or has other needs, tell your staff assigned employee or the front desk. DO NOT take it on yourself to provide services without permission from your staff assigned employee.
- 11.If anyone has questions about the operation of shelter refer them to your staff assigned employee, the front desk or the shelter director.
- 12.We hope you make it your responsibility to ask questions and learn about the Baldwin County Animal Control Center so you can be a more effective volunteer and share your experience with your circle of friends and acquaintances.

Note: Unless instructed otherwise, do not loiter in the shelter office when you are not busy.

Acknowledgement of receipt

I have received a copy of the Volunteer Handbook for the Baldwin County Animal Control Center. I understand I am to become familiar with the contents of the handbook as it outlines my responsibilities as a volunteer and provides guidelines for my work at the shelter. If I have questions about the content of this Handbook, I understand that I should contact the shelter director.

Further, I understand:

- This handbook represents a brief summary of some of the more important shelter guidelines. Therefore, the handbook is not all inclusive.
- This shelter retains the sole right to change, modify, suspend, interpret, or cancel in whole or in part any of the published or unpublished policies or practices. This shelter can take such actions without advance notice and without having to give cause or justification.

Volunteer Signature

Date

Staff Member

Date

Director

Date

VOLUNTEER APPLICATION

NAME: _____

CURRENT ADDRESS: _____

MAILING ADDRESS: (IF DIFFERENT) _____

DAYTIME PHONE: _____

OTHER PHONE: _____

EMAIL ADDRESS: _____

OVER 18 ____ YES ____ NO

EMERGENCY CONTACT: _____

RELATIONSHIP: _____ PHONE: _____

EDUCATION: (Circle last year completed) HIGH SCHOOL 1 2 3 4

COLLEGE 1 2 3 4 5+ IN COLLEGE NOW? ____ YES ____ NO

WHERE _____ MAJOR _____

VOLUNTEER EXPERIENCE: (Please describe) _____

ARE YOU CURRENTLY EMPLOYED? ____ YES ____ NO

WHERE? _____

OCCUPATION: _____

DO YOU HAVE ANY EXPERIENCE WORKING WITH ANIMALS?

DESCRIBE _____

DO YOU HAVE SKILLS THAT COULD BE USED AT THE SHELTER?

DESCRIBE _____

DO YOU HAVE ANY PETS? ___ YES ___ NO

HOW MANY? DOGS ___ CATS ___ OTHER _____

HAVE YOU ADOPTED OR RESCUED FROM BCACC? ___ YES ___ NO.

IFYES, WHEN? _____

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I WILL BE DOING VOLUNTEER WORK FOR THE BALDWIN COUNTY ANIMAL SHELTER AND I UNDERSTAND AND AGREE TO THE FOLLOWING:

1. Volunteers shall abide by the safety rules, regulations, policies and procedures of the BCACC.
2. Volunteers shall work at BCACC at their own risk.
3. Volunteers hereby indemnify and hold harmless BCACC for any damage, injury or casualty resulting from their work on the premises of BCACC or in any related work concerning BCACC.
4. BCACC shall not be liable in any manner or form for the negligence or unlawful act of the volunteer.

Volunteer Signature

Date

**DEPARTMENT OF PUBLIC HEALTH
ACKNOWLEDGEMENT OF POLICY**

I, _____,
Hereby certify that I have received, read and understand

The following policies:

Sexual Harassment Policy, #03 – 16
Civil Rights – Equal Employment Opportunity Policy, #96 – 13
Drug-Free Workplace Policy, #04 – 19
Revised HIPAA Policy and Security Policy, #2014 – 011

Volunteer Signature Volunteer's SS# Date

Shelter Supervisor Signature Date

County/Site

VOLUNTEER'S HOLD HARMLESS AGREEMENT

Volunteer's Name: _____

Volunteer's Job: _____

Assigned by: _____ **Date:** _____

I hereby release and agree to hold harmless to promoters, the owners, and the lessees of the premises, the participants, and the officers, directors, officials, representatives, agents, and employees of all of them, of and from liability, loss, claim and demands that may occur from loss, damage or injury (including death) to my person or property, in any way resulting from, or arising in connection with this, and whether arising while engaged in caring for animals or preparation therefore, or while upon entering or departing from said premises, from any cause whatsoever except liability loss, claim and demands that occur as a direct result of the negligent acts of the Baldwin County Health Department or its agents. I know the risk and danger to myself and property while upon said premises, so voluntarily and in reliance upon my own judgment and ability, I thereby assume all risk of loss, damage, or injury (including death) to myself and my property from any cause whatsoever, except where such loss, damage, or injury (including death) is the direct result of negligent acts of the Baldwin County Health Department or its agents.

PLEASE PRINT

Name: _____ **Age:** _____

Address: _____

City: _____ **Phone:** _____

I have read the volunteer's hold harmless agreement and policy guideline instructions given to me by a Baldwin County Health Department employee and agree to follow them. I am aware that there is limited insurance coverage for medical bills I may incur for injury that may occur while I am at the Baldwin County Health Department in a voluntary capacity.

Signature: _____ **Date:** _____