

**Twin Falls County Juvenile Probation
Ashley Ator, Community Service Supervisor
Twin Falls, ID 83301**

**(208) 736-4215 Ext. 3125
Cell 208 539-1014**

COMMUNITY SERVICE PROGRAM

All youth participating in the Community Service Program must be covered by Workman's Compensation Insurance. Workman's compensation is \$.60 per hour ordered to work. You will not be assigned to work until your workman's comp. is paid, and your paperwork is filled out and signed by both you (parent/guardian) and your son/daughter and returned to the Community Service Supervisor. The Community Service Program will only accept kids age 12 or over.

Work crews usually consist of eight youth and a work crew supervisor. Your son/daughter must meet the work crew supervisor at the C/S building at or before 8:00 am and work until time specified on schedule – typically 4:00 pm. **The person dropping off /picking up your son/daughter, will be required to sign them in in the morning and sign them out in the afternoon.** If they will be driving or riding their bike, you will be required to send a note with them giving them permission to do so. The supervisor will transport your son/daughter to and from the C/S building and the work site. **You will be expected to pick up your son/daughter at the C/S building at the time specified on the schedule.** The supervisor will keep a time sheet of hours completed. You will be informed in advance if you are to meet at a different location and/or a different time.

Community Service is a privilege the Court allows--not a right. Because of this, your son/daughter will be required to follow all rules and expectations of the Community Service Program. You will find a list of Community Service rules and expectations attached to this letter.

Individual placements are arranged through this office. However, you may locate a placement and then coordinate the arrangements through Community Service (these arrangements must be approved by the Community Service Supervisor or Probation Officer before you begin a job). Supervision must be provided at all times, either through a designated individual at the work site or a volunteer that is willing to act as a workplace mentor. You are also responsible for taking a time sheet and returning it with a record of hours completed. Credit for the hours your son/daughter has completed will not be given to them if you fail to return the time sheet.

Also, you are to call in weekly to schedule more community service hours, unless all hours ordered were already assigned. Do not assume that because you were scheduled for a certain day this week that you will automatically be scheduled for the same day next week.

Medical Consent Form signed _____
W/C Paid – Receipt Info: _____

Community Service & Restitution Work Crew Rules and Expectations

GOAL & WORK EXPECTATIONS

Our goal is for you to learn responsibility in our community, work ethics and pride in yourself and your work. Therefore, you will be required to be on time and ready for work. You will be working with your peers; therefore, cooperation and communication skills are important.

RULES

(Place a check in each box as you read the following rules)

- ☐ 1. The use of drugs, alcohol and/or tobacco are prohibited. If we suspect you are using any of these substances, your Probation Officer will be notified.
- ☐ 2. You must make it to your scheduled community service dates! **The Child will not be allowed to call in for themselves. A Parent will be required to call before their scheduled time to be here.** Be on time. Juvenile must arrive at Juvenile Probation no later than 8:00 a.m. **Late arrivals will result in being sent home, refused opportunity to work that day and treated as a no-show. You will be allowed to reschedule. There will be a \$10.00 rescheduling fee paid prior to any rescheduling, unless you provide a written Doctor's excuse. NO EXCEPTIONS**
- ☐ 3. Safety is very important and any misuse of equipment will not be tolerated.
- ☐ 4. All juveniles are expected to dress accordingly for weather conditions. Long pants, full shirt (no tank tops or sleeveless shirts, no stretch pants/leggings. No skin will be permitted to show, if you lift your arms and your belly, back, side, etc. can be seen then you will be sent home.), tennis shoes or boots must be worn at all times. **Gang related-clothing, shorts or open-toed shoes (flip flops, sandals, etc.) are NOT to be worn!** If you are dressed inappropriately, you will be sent home and your Probation Officer will be notified and you will be reported as a **no show**. Remember do not wear anything you don't want to get ruined. **Youth will be required to wear a belt.** Youth with pants that do not stay up on their hips will be issued a pair of suspenders to help keep their pants up. **Baggy pants with underwear showing, will not be tolerated.**
- ☐ 5. No foul language and/or gestures will be tolerated.
- ☐ 6. Juvenile must obey the instructions of the work crew supervisor. Laziness or horseplay will not be tolerated. Failure to comply with the work crew supervisor will result in notification to your Probation Officer and appropriate action will be taken.
- ☐ 7. Absolutely **NO** jewelry may be worn while completing your community service hours; including earrings, watches, tongue bars, nose rings, etc.
- ☐ 8. On full-day crews, juvenile **must** bring a sack lunch and drink, no exceptions. **Failure to bring a lunch will result in being sent home, refused opportunity to work that day, and reported as a no-show to your Probation Officer and the Court.** You will be charged a \$10.00 reschedule fee.
- ☐ 9. If a youth is being **disruptive** in any way, appropriate action will be taken by the supervisor, including, but not limited to, suspension or termination from the Community Service Program.
- ☐ 10. While being transported juvenile will not be permitted to adjust heat or radio or make any other adjustments to vehicle without first asking permission of the crew supervisor.
- ☐ 11. **Youth are to bring nothing with them except their lunch. Cell phones are not allowed at community service. NO EXCEPTIONS!**

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THESE RULES. SHOULD I VIOLATE ANY OF THESE RULES I UNDERSTAND THAT MY PROBATION OFFICER WILL BE NOTIFIED AND THE APPROPRIATE ACTION WILL BE TAKEN.

_____ JUVENILE SIGNATURE

DATE_____

_____ PARENT/GUARDIAN'S SIGNATURE

DATE_____

HEALTH INFORMATION

LEGAL NAME: _____

AGE: _____ GENDER: M F

ADDRESS: _____

DATE OF BIRTH: ____/____/____
MO. DAY YEAR

PARENT(S)/GUARDIAN: _____

HOME PHONE: _____ WORK PHONE: _____

EMERGENCY CONTACT: _____

ADDRESS: _____

PHONE: _____

Do you have, or have you had (please check one):

Asthma: YES ☐ NO ☐ If yes, when/details: _____

Diabetes: YES ☐ NO ☐ If yes, when/details: _____

Alcoholism: YES ☐ NO ☐ If yes, when/details: _____

Drug Abuse: YES ☐ NO ☐ If yes, when/details: _____

Surgeries: YES ☐ NO ☐ If yes, when/details: _____

Hepatitis: YES ☐ NO ☐ If yes, when/details: _____

Severe Illness: YES ☐ NO ☐ If yes, when/details: _____

Depression: YES ☐ NO ☐ If yes, when/details: _____

Do you have or have you had allergies: YES ☐ NO ☐ If yes, please list: _____

Are you taking any medications? YES ☐ NO ☐ If yes, please list: _____

Do you have any other medical or physical concerns: YES ☐ NO ☐ If yes, please list: _____

Do you give permission for crew supervisor to administer any necessary emergency over-the-counter medications for headaches, stomachaches, cramps, etc.? YES ☐ NO ☐ If yes, please list: _____

Name of Physician: _____

Phone: _____

Name of Dentist: _____

Phone: _____

By signing this release, I give my permission for Twin Falls County Juvenile Court Services to seek and obtain any and all medical assistance on my behalf in the event of any accident or illness while in the Community Service Program.

Parent/Guardian Signature

Date

