

## **ReFinement Program Community Service Site Agreement**

Agency Name:		Non Profit Organization? Y N	
Address:		Tel:	
Contact Name:		Tel:	
Email	:	Website:	
Start Date:		End Date:	
•		nteers of America/Penobscot County Sheriff's Department e following rules and conditions of participation:	
Partic	cipant Safety and Workplace Env	vironment	
	performed. Necessary safety equipment and proceed The Agency is responsible for assuriunsafe. The Agency will ensure that all emplif the Agency violates any of the woremoved from the Agency immediate	and necessary safety equipment, training, and supervision for all tasks to be cedures will adhere to State and Federal safety standards. ing that the duties or tasks assigned to Participants are not hazardous or cloyees of the Agency treat Participants in a fair and respectful manner. ork agreement related to the ReFinement Program, the Participants will be rely and reassigned. An Agency in violation will be suspended from the w by Volunteers of America or Penobscot County Sheriff's Department Staff able City, State, and Federal laws.	
Repor	rting Responsibilities		
<ol> <li>2.</li> <li>3.</li> <li>4.</li> </ol>	<ul><li>email, all hours worked by all Participants in the ReFinement Program after every service date using a form that will be provided.</li><li>3. The Agency will immediately notify Volunteers of America if the Participant engages in any unsafe or irresponsible behavior. Criminal behavior will be reported immediately to the local police, then to Volunteers of America.</li></ul>		
the Ag	uled ReFinement Community Servi gency which could constitute gross	a result of any criminal acts committed by the Participants during ice. This limitation of liability does not apply to actions on the part of negligence, recklessness, or willful misconduct. In turn, the Agency he Penobscot County Sheriff's Department liable for any damages or ReFinement Program.	
	gency agrees to abide by the above ency status within the ReFinement	e agreement and understands that failure to comply could result in loss Program.	
Ageno	cy Representative:		

Office (207) 941-9450 Fax: 990-3681 Brandee Cell: 570-4318 Keri Cell: 446-6042

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

Printed Name: