Print Form

City of Raleigh
Parks, Recreation and Cultural Resources Department
Personal Assistant Policy

The City of Raleigh, Parks, Recreation and Cultural Resources Department welcomes the participation of all individuals in our programs, including those with disabilities. We are fully committed to complying with the Americans with Disabilities Act and providing reasonable accommodations to facilitate participation in our programs. The City of Raleigh recognizes that individuals with disabilities may require the support of a Personal Assistant in order to fully access and participate in PRCR programs. As used herein, a Personal Assistant is an individual designated by an individual with a disability or the participant's parent/guardian to provide specialized support, supervision and/or assistance to the participant during a PRCR program. A Personal Assistant can be a family member, care giver, service provider, or other individual able and qualified to provide needed support to a PRCR participant with a disability. PRCR staff will work with the participant and/or their parent/guardian to determine the level of support, if any, which is necessary and appropriate to reasonably accommodate participation in a particular RPRD program.

The PRCR recognizes the vital role that Personal Assistants play in the positive and successful experiences of the individual(s) they serve. The information contained herein is intended to provide guidance to enhance the experience of all parties interested in the participant including the personal assistant, family members, PRCR, and the personal assistant's agency (if applicable). The PRCR also collects information from and about Personal Assistants for the safety of the PRCR, the personal assistant and all participants.

Expectations for all persons working with PRCR programs:

- Remain with the participant(s) during program hours.
- Assist the participant(s) and engage in all program activities.
- Be responsible for the care of participant(s). This includes assistance with and/or teaching skills (i.e. health, nutrition, hygiene, sportsmanship, social skills, recreational activities, etc.), adequate supervision for safety, and providing a healthy environment for all participants.
- Utilize positive behavior management techniques to address behavior issues for the participant(s).
- Promote inclusion of the participant(s) in all activities.
- Positively interact with all program participants, staff and parent/guardian. Be a contributing member of the partnership by giving and accepting constructive feedback.
- Adhere to PRCR policies and guidelines regarding dress code, cell phone use, etc.

Expectations for Personal Assistants:

- Provide specialized services such as intensive behavior support (safety, management systems, etc.), medical/personal care (i.e. catheterization, medication administration, toileting, feeding, etc.), physical assistance (mobility devices, safety, transfers, etc.), and/or special assistance with effective communication.
- Remain with and assist the participant during transport to off-site activities.
- Follow the guidance of PRCR staff for behavior management. Requests for a personal assistant to provide behavior management techniques not utilized by PRCR staff will be addressed on a case by case basis with the Specialized Recreation and Inclusion Services Program Director, and the personal assistant may be required to show proof of training, certification and/or authorization to perform the behavior management technique(s).

To participate in PRCR programs as a participant's Personal Assistant:

- Complete the attached information and waiver forms. (Information and waiver forms must be filled out for each program.)
- Consent to and be cleared through a standard PRCR background investigation that is conducted for all staff and volunteers. (Background investigation must be completed annually.)

It may take up to two weeks to process an application for a Personal Assistant; please plan accordingly. To submit information, or for questions or more information about PRCR's Personal Assistant program please contact:

Raleigh Parks, Recreation and Cultural Resources Department Phone (919) 996-6835
Specialized Recreation and Inclusion Services Program Director

City of Raleigh Parks, Recreation and Cultural Resources - Personal Assistant Information Form

Personal Assistant Name: _____ _____
Last First Middle Initial Age

Address: _____

City: _____ State: _____ Zip: _____

Phone (home):_____ (cell): _____

Email: _____

In case of emergency, notify: _____

Relationship: _____ Phone: _____

(Personal Assistants younger than 18 must have a parent/guardian signature and be pre-approved by the Specialized Recreation and Inclusion Services Program Director. All Personal Assistants must also complete the attached Background Investigation and Release & Indemnity Form.)

Agency or Group Personal Assistant is Employed by (if applicable): _____

Agency Supervisor (if applicable): _____ Supervisor Phone Number: _____

Name of Participant(s) you serve: _____

Name of Program you will be assisting the Participant in: _____

Please sign below when you have read and understand all statements.
I certify that the statements provided on this information form are true, correct, and given voluntarily. In addition, I understand that this information may be disclosed to any party with legal and proper interest.

I understand that the Raleigh Parks, Recreation and Cultural Resources Department reserves the right to screen personal assistants, and the Department will not accept as a personal assistant anyone who would jeopardize any aspect of service or the safety of PRCR customers and staff.

I understand that Raleigh Parks, Recreation and Cultural Resources Department may contact my Agency or Group to verify my employment or affiliation.

I will also not abuse any information, materials, or hardware I may use or obtain while working as a Personal Assistant.

Personal Assistant Signature: _____ Date: _____

Participant's (Parents/Guardian) Signature: _____ Date: _____

Relationship to Participant: _____

PRCR SRIS Director Signature: _____ Date: _____

Non-Discrimination Policy – The City of Raleigh Parks and Recreation Department does not discriminate on the basis of race, color, national origin, sex, religion, age, sexual orientation or disability in employment opportunities or the provision of services, programs or activities. A participant alleging discrimination on the basis of any of the areas may file a complaint with either the Director of the Raleigh Parks and Recreation or the Office of Equal Opportunity, U.S. Department of the Interior, Washington, DC 20240

RALEIGH PARKS, RECREATION AND CULTURAL RESOURCES
RELEASE, COVENANT NOT TO SUE, AND INDEMNITY AGREEMENT

I wish to assist with one or more of the Special Events or Recreation Classes provided through Raleigh's Parks and Recreation Department to facilitate the event for my enjoyment, and so that my family and other citizens can participate. I agree that class or event access provides a benefit to me and to my family and is adequate consideration for this agreement. I understand that assisting in this activity involves risk of injury. These risks include inclement weather or excessive heat, falling debris, accidents while traveling or from vehicles traveling to or from the event or parking at it, injuries from equipment problems or failures, proximity to vehicles or equipment (including those producing debris or dust), contact with and actions of event participants, event staff or other volunteers, slips/trips/falls, musculoskeletal injuries, harm from contact with sharp objects or tools, contact with chemicals or irritants, exposure to wildlife (including snakes and biting insects), among others. I choose for myself or for my child to assist in this activity despite the risks.

By signing this form, I acknowledge all risks of injury, illness, and death and affirm that I have assumed all responsibility of injury, illness, or death in any way connected with assistance in this activity. I also agree for myself and for any child assisting to follow all rules and procedures that apply to the activity and to follow the reasonable instructions of the City staff and other supervisors of the activity.

In return for the opportunity described above, I agree for myself and for my heirs, assigns, executors, and administrators to release, waive, and discharge any legal rights I may have to seek payment or relief of any kind from the City, its employees or its agents for injury, illness, or death resulting from the activity. If I am allowing a child to assist in the activity, I agree that I am a parent, legal guardian, or am otherwise responsible for the child who is assisting, and I release, waive, and discharge any legal rights that I may assert on behalf of the child assisting in this activity. I also agree not to sue the City, its employees, or its agents and agree to indemnify the City for all claims, damages, losses, or expenses, including attorney's fees, if a suit is filed concerning an injury, illness, or death to me or to my child resulting from assisting in this activity.

I understand that the City of Raleigh provides no insurance or worker's compensation coverage for me or for my child. I have read this document thoroughly and understand that by signing this form I am waiving legal rights.

Pictures or video may be taken of volunteer for use in program publicity.
☐ Please check, if you do not concur

Name of Personal Assistant: _____

Signature of Personal Assistant: _____
(or of parent/legal guardian if Personal Assistant is under 18)

Address of Personal Assistant: _____

Email Address of Personal Assistant: _____

Printed Name of Parent/Legal Guardian (if under 18): _____

Date signed: _____

CITY OF RALEIGH PARKS, RECREATION & CULTURAL RESOURCES
INVESTIGATIVE BACKGROUND CHECK

TO BE COMPLETED BY APPLICANT'S SUPERVISOR ***PLEASE PRINT***

Supervisor Name/Phone#: Nikki Speer-Raleigh **Position of Applicant:** Personal Assistant

Program or Sport: Specialized Recreation & Inclusion Services **Work Location:** various

Briefly describe Position duties and responsibilities (include % of time in contact with children or in supervisory role over participants; % of time left unsupervised by full time staff; other major responsibilities):
100% contact with children, 100% supervisory role over single participant, 100% supervised by PT staff

Check One: ☐ Paid ☒ Volunteer **Drive City/Personal Vehicle:** ☐ Yes ☒ No **Handling City Funds:** ☐ Yes ☐ No

Name: _____ _____ _____ _____
Last First Full Middle Maiden

Driver's License Number: _____ Issuing State: _____ Home Phone # or Cell Phone #: _____

Date of Birth: _____/_____/_____ Sex: ☐Male ☐Female Race: _____

Social Security Request and Statement of Purpose: To comply with the Confidential Records Law, your Social Security number is requested because you are being considered for employment or volunteer placement with the City of Raleigh Parks, Recreation & Cultural Resources Department. The Social Security number is required to process a criminal background investigation.

If you have lived outside of North Carolina within the last 10 years, you must provide your full 9-digit Social Security number.

Social Security Number: _____ - _____ - _____

Address History: Please provide 10 FULL years of addresses below. (Do not list Post Office boxes.)

Current Address: _____ _____ **years** _____ **months**
Street Address **Length of Time at this Residence**

_____
City **State** **Zip**

Previous Address: _____ _____ **years** _____ **months**
Street Address **Length of Time at this Residence**

_____
City **State** **Zip**

Prior Address: _____ _____ **years** _____ **months**
Street Address **Length of Time at this Residence**

_____
City **State** **Zip**

Have you ever served time in prison? Note: A "yes" response does not automatically disqualify you from employment. The date and nature of the offense and the type of job for which you are applying will be considered. ☐Yes ☐No

Have you ever been convicted of a felony? Note: A "yes" response does not automatically disqualify you from employment. The date and nature of the offense and the type of job for which you are applying will be considered. ☐ Yes ☐No

If you answered "Yes" to any of the above questions, please explain the circumstances: _____

AUTHORIZATION FOR BACKGROUND CHECK: I hereby certify, by my original signature below, that the information I have provided is accurate and true to the best of my knowledge and I authorize the City of Raleigh to conduct a Criminal, Department of Corrections, and Sex Offender Registry check on my background while I am employed or volunteering with the Parks, Recreation & Cultural Resources Department. I understand that providing false statements or falsification of information will result in disqualification of employment. I understand that the City will routinely perform background checks during the period of employment or serving as a volunteer. Information found and not previously disclosed by me, or information made available which was previously not disclosed, will be used by the City as part of the determination of my eligibility to continue in my capacity with the City. I have read and understand these requirements.

_____ _____
Applicant's Signature **Date**

TO BE COMPLETED BY 608 BUSINESS OFFICE STAFF

AOC Check:	**National Sex Offender Registry Check:**	**NC DOC Incarceration Check:**	**Out of State Check (If Applicable):**
__No Arrest Record	___ Negative	____No Incarceration Record	_____ State(s)
____Arrest Record Attached	___ Positive	____Incarceration Record Attached	_____ Date Submitted to ABC

Examples of Offenses Considered Unacceptable for Employment/ Volunteer With the City of Raleigh Parks and Recreation Department

Persons charged with and found guilty of the following crimes will not be allowed to work with the City of Raleigh Parks and Recreation Department. This listing of examples of criminal convictions is not exhaustive and conviction for other crimes or repeated charges for the same or similar charge(s) may be considered unacceptable as determined by the Parks and Recreation Director.

Manslaughter
Murder
Homicide
Abduction (of child or adult)
Robbery
Carjacking
Extortion
Felony Stalking
Sexual assault/sex offender charges (including incest, crimes against nature, taking indecent liberties with a minor)
Drive by shootings
Child abuse/neglect
Possession of child pornography
Escape from jail
Assault charges (assault on a government official, assault with a deadly weapon with intent to inflict injury, assault on a person)
Prostitution
Rape
Embezzlement
Forgery
Burglary or Larceny
Possession of weapon on school grounds, possession of weapons to cause mass destruction
Resisting a Public Officer
Domestic Abuse
Alcohol Offenses (open container offenses, consumption of beer/wine in public, possession of alcohol on unauthorized premises, possession of alcohol under age 21)
Drug charges (drug possession, possession of drug paraphernalia, maintaining a dwelling for a controlled substance)

3 background searches will be performed on each Candidate/Volunteer:

1: **National Offender Registry Check** = Results available at http://www.nsopr.gov/

2. **NC Department of Corrections** = Results available at http://webapps.doc.state.nc.us/apps/offender_servlets/search1

3. **AOC/CCBI Statewide Record Check** = Criminal, Infraction, and Archived record check conducted using AS-400 system. Results for Wake County charges available at Salisbury Street CCBI office (in Wake County Public Safety Center). Records for other Counties must be obtained from their County Court Records office.