



Court of Common Pleas of Berks County

**Twenty Third Judicial District of Pennsylvania
633 Court Street, Reading PA 19601
Daniel C. Heydt - Chief Probation & Parole Officer**

Adult Probation & Parole Office
Brendan L. Harker, Deputy Chief
Nicholas S. Volo, Deputy Chief
Services Center 7th Floor
(610) 478-3400 Phone
(610) 478-3451 Fax

Juvenile Probation Office
Barbara D. Dancy, Deputy Chief
William D. Keim, Deputy Chief
Service Center 10th Floor
(610) 478-3200 Phone
(610) 478-3251 Fax

COMMUNITY SERVICE AGREEMENT

I, _____, agree to enter the Community Service Program as permitted by the Berks County Court of Common Pleas and agree to all of the following terms and conditions:

1. I understand that I will not receive any compensation for work performed in the Community Service Program.
2. I agree not to make any claims against the Community Service Program, Adult Probation & Parole Office, Berks County Court of Common Pleas or any agency or agency employee for whom I am working under the Community Service Program or for emergency or routine medical care that I may need as a result of such injury, unless such injury is intentionally inflicted by employees of the above agencies. I understand that I am giving up rights that may entitle me to payment in the event of injury.
3. I agree to complete _____ hours of community service work for a non-profit agency or organization, as approved by the Adult Probation & Parole Office. I agree to perform community service work consistently, abiding by the approved schedule. I agree to perform a minimum of _____ hours per week/month and to complete the Community Service Requirement by _____.
4. I understand I may be assessed additional days of community service for non-compliance or unexcused absences. I further understand that failure to comply with Community Service will result in a technical violation of my supervision, and possible incarceration.
5. I agree to provide my own transportation to the worksite. I will dress appropriately while at the worksite. I will be responsible for my own lunch. I will follow the safety and work guidelines at the worksite.
6. I agree to notify the Community Service Program in advance if I am unable to attend work as scheduled and/or if I change my address, telephone number, or employment/school status. I will provide a written doctors excuse for any absence due to illness.
7. I agree to contact the Community Service Program regarding any problems or difficulties at the worksite.

I understand that failure to comply with all of these conditions may result in further Court action.

Participant

Date

Witness

Date