



**Animal Shelter  
Volunteer Application**

Please complete and sign this application and return it to the Animal Shelter.

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

Name \_\_\_\_\_  
First Middle Last Nickname

Address \_\_\_\_\_  
City State Zip

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Date of Birth (M/D/YY) \_\_\_\_\_ e-mail address \_\_\_\_\_

Emergency Contact & Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Education: (Last year completed) High School 1 2 3 4  
College 1 2 3 4 Graduate 1 2 3 4

Name of School/College \_\_\_\_\_

Are you presently employed? Yes No May we call you at work? Yes No

If employed, state your work schedule \_\_\_\_\_

Occupation, Employer's name, address, & phone number:

Why are you interested in becoming an Animal Care Center volunteer?

Describe previous experience working with animals:

List present and previous volunteer jobs:

List additional information that may be useful (animal experience, special skills, strengths, talents, interests, hobbies).

What kind of volunteer job are you currently interested in ?

Are you available regularly each week?            Yes            No

Please check days and shifts you would prefer:

Shift Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
8 am – 11 am							
9 am – noon							
Noon- 3 pm							
3 pm – 6 pm							

How did you hear about the Animal Care Center volunteer program?

Please list two (2) references, who are not family members:

Name	Relationship	Phone Number
Name	Relationship	Phone Number

***I give permission to the Animal Care Center to verify any of the information given.***

Volunteer Signature	Date

Comments:

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**Department Use: New Volunteer Information**

Specific Dept. Trng.

Volunteer's Name \_\_\_\_\_

Interview Date \_\_\_\_\_ Placement \_\_\_\_\_ Date: \_\_\_\_\_

Training Date \_\_\_\_\_ Shift \_\_\_\_\_ Time: \_\_\_\_\_

Interviewer \_\_\_\_\_ Start Date \_\_\_\_\_ Trainer: \_\_\_\_\_