

ORANGE COUNTY ANIMAL SHELTER

11362 Porter Road
Orange, VA 22960
540-672-1124 or 540-672-7047 Fax

Volunteer Application

Name: _____ Telephone # _____ (H) _____ (W)

Address: _____ Social Security # _____ - _____ - _____

City/St/Zip: _____ E-mail Address: _____

Birthday (month and day only): _____ Are you 18 or older? * _____ *Volunteers under 18 years of age need parent's signature.

Signature: _____ Date: _____

In case of emergency, please contact:

Name _____ Telephone # _____ (H) _____ (W)

1. How did you hear about our organization?

2. Do you have any allergies or physical conditions which might affect your volunteer work? If so, please describe.

3. Are you a member of any other animal welfare organization? If so, please explain your participation.

4. Do you have any formal training in pet care or animal welfare? If so, please tell when, where, and type of training.

5. Have you ever had experience in dealing with the general public? If so, please explain.

6. Please describe the type(s) of volunteer work you wish to perform. (i.e.: office work, computer entry, cleaning, dog walking, animal grooming, yard work, etc.)

7. Please list the day(s) of the week and the times you would be available.

Volunteer Application

Why do you wish to volunteer for the Orange County Animal Shelter?

What are your thoughts about spaying and neutering animals?

Have you ever been found guilty of any violations pertaining to animal cruelty? If so, please describe.

Do you have any pets? If so, please tell us about them.

Do you have any questions for the Orange County Animal Shelter?

Please list two (2) personal references and one (1) veterinary reference:

Name

Business/Address

Telephone #
