



S.A.I.N.T.S RESCUE VOLUNTEER APPLICATION

- First & last name:
- Full mailing address:

- Date of birth:
- Home phone:
- Cell phone:
- E-mail address:
- In case of emergency contact (Name, number, and relationship to you):

- What is your weekend availability?

Saturday Sunday

- Are you available to volunteer from 9am-12pm

Yes No

- Are you able to make a commitment of a minimum 50 hours or 6 months?

Yes No

- Are you:

Student Working Retired

- If working current position:

- Have you ever been charged with animal cruelty?

Yes No

- If under the age of 16, do you have a parent/guardian available to volunteer with you?

Yes No

- Are you a court referred volunteer? (Community service)

Yes No

- If volunteering with a group, what is the name of the group?



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- What is the purpose of your group seeking volunteer opportunities?
- Why do you want to volunteer in an animal shelter?
- Do you have any physical limitations that would affect your ability to volunteer?
Yes No
- If yes to the above, please explain:
- What animals have you ever worked or volunteered with:
- What area(s) are you interested in volunteering:
- Please indicate the extent of your related experience and skills for this area(s)
- Are there any particular animals or breeds you are uncomfortable around?
- List pet companions you have at home:

Name	Type	Spayed/Neutered
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Where did you obtain your pet?

Where does your pet live during the day?

Where does your pet sleep at night?

- Have you ever found a new home for your pet?
- What was the reason that you had to re-home?
- How did you learn about S.A.I.N.T.S?



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- Have you ever had any previous experience with S.A.I.N.T.S?
Yes No
- In what capacity?
- List any organization/s you have volunteered for:
- Why did you stop volunteering for the above organization(s)?
- List any organizations you are volunteering for now:
- Have you ever volunteered for an animal rights group?
Yes No
- If yes, please supply the name of the group
- What does volunteering mean to you?
- What do you hope to get out of your volunteer experience with S.A.I.N.T.S?
- List any skills you think would be beneficial to our shelter (i.e. Writer, photographer, gardener, graphic skills etc.)
- What is your opinion on pet companions being "outside only" pets?
- What is your opinion on spay/neutering pet companions?



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- What is your stance on euthanizing animals in animal shelters?

SAINTS Volunteer Waiver Form

I _____ having attained the age of 19 years old, understand that I am wholly (PRINT LEGAL NAME) responsible for my actions and their consequences. I will hold neither SAINTS nor any of the volunteers, staff, board member or director responsible or liable for any injury to myself while at SAINTS.

Volunteer's Signature: _____ Date: _____
My electronic signature: _____

OR

I, _____ as the legal parent/guardian of, _____
(PRINT NAME OF PARENT OR GUARDIAN) (PRINT LEGAL NAME OF MINOR)
hereby grant the aforementioned person my permission to both attend and work as a volunteer at S.A.I.N.T.S. I understand that I am wholly responsible for the actions of the aforementioned person, and the consequences thereof. I will hold neither SAINTS nor any other volunteer, staff, board member or director responsible or liable for any injury to the aforementioned person while at SAINTS.

Guardian's Signature: _____ Date: _____
Relationship to Minor: _____

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.
Thank you for completing this application form and for your interest in volunteering with us. Only successful candidates will be contacted for volunteering opportunities. Thank you for your interest.