



# VOLUNTEER APPLICATION

PLEASE PRINT

Today's Date \_\_\_\_\_

## PERSONAL INFORMATION

Last Name	First Name	Middle Initial	What is your age range? 15-18   19-30   31-40   41-50   51-65   65+					
SS#	Home Phone		Cell Phone					
Address			Apt #					
City	State		Zip					
E-Mail	Driver's License or I.D. #		Date of Birth					

## EDUCATION & WORK EXPERIENCE

Current employment status (Circle One) Employed Full Time   Employed PT   Homemaker/Unemployed/Retired	Circle last year of school completed: High School   9   10   11   12
Current student?   If student, where?   College Major	College   1   2   3   4
Yes / No	Graduate School   1   2   3   4
Current / Most recent employer	Language(s) spoken: <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> French <input type="checkbox"/> Other _____
What is your profession?	

Have you ever been convicted of a felony?   Yes      No  

If yes, please elaborate (Answering yes does not necessarily preclude volunteer service):

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## AVAILABILITY

How long a commitment can you make? <input type="checkbox"/> 3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/> 9 Months <input type="checkbox"/> 12 Months <input type="checkbox"/> Other _____	Availability – Please check the boxes for the days and times you are the most often available to volunteer:							
	S	M	T	W	Th	F	S	
Morning 6 – 12 p.m.								
Afternoon 12 – 3 p.m.								
Evening 3 – 7 p.m.								

### This section for animal shelter use only:

Background Check: Pass   Fail	Welcome email sent: <input type="checkbox"/>
Email Entered: Yes   N/A	B/O Scheduled for:
Minor?   Yes   No   How old? _____	Adult Supervisor:

Please check the box next to your area(s) of interest:

- |   |   |                                 |
|---|---|---------------------------------|
| <input type="checkbox"/> Canine Counselor | <input type="checkbox"/> Feline Counselor       | <input type="checkbox"/> Events |
| <input type="checkbox"/> Bather           | <input type="checkbox"/> Adoption Runner        |                                 |
| <input type="checkbox"/> Guest Liaison    | <input type="checkbox"/> Lost & Found Assistant |                                 |
| <input type="checkbox"/> Mobile Adoptions | <input type="checkbox"/> Public Education       |                                 |

Do you have any particular skills or interests that you think could help in a unique way? \_\_\_\_\_

Do you have any physical limitations that may require accommodation or restrict your volunteer experience? Please explain.

### VOLUNTEER EXPERIENCE / MOTIVATION

What animals do you currently care for?	
List and describe any previous volunteer experience you have:	Please indicate the reason you are seeking a volunteer position: <input type="checkbox"/> Personal fulfillment <input type="checkbox"/> To meet new people <input type="checkbox"/> Family / Friends already involved <input type="checkbox"/> Requirement <input type="checkbox"/> Professional Development <input type="checkbox"/> Extra Time <input type="checkbox"/> Other _____ _____
List any skills, interests, hobbies or experiences you have had with pets:	

Please tell us how you found out about volunteering with Miami Dade Animal Services:

- Newspaper  Website  Television  Friends  Other: \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

Contact Name: \_\_\_\_\_ Relationship to volunteer: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_



**VOLUNTEER AGREEMENT**

I will abide by the policies and procedures set by Miami Dade Animal Services. I will treat all animals respectfully and with care. I understand that Animal Services is an open admission facility and though the attempt is made to save as many animals as possible, euthanasia is a necessary part of the shelter. I will be polite and professional to all staff, other volunteers and the public at all times. I will wear a uniform to include tan pants, volunteer shirt and name tag at all times. Should there be any problems with an animal, staff person or the public, I will speak only to a supervisor regarding the issue. I will speak in a positive manner regarding Animal Services at all times. I will volunteer during the day/time I have committed to and use a time card. In addition, I will do the job I am assigned to and stay in the area I am assigned to. I will not use cell phone in front of customers. If phone calls are necessary, I will use it in the back of building as a courtesy to the customers. Because my safety is paramount, safety protocols must be adhered to at all times and at all levels; thus, I must have the ability to follow and execute written and verbal instructions from designated immediate supervisors and chain of command.

I agree to respect the confidential nature of the information I may obtain. I understand that my failure to follow the policies and rules of the Animal Services Department will result in the termination of my services as a volunteer.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_



**VOLUNTEER WAIVER**

- 1. I, \_\_\_\_\_ agree to release, discharge, indemnify, and hold harmless Miami-Dade Animal Services for any and all damage to my personal property while performing my volunteer services at Animal Services in a volunteer capacity.
- 2. I recognize that in handling animals at Animal Services while performing my volunteer services, there exists a risk of injury, including personal physical harm. On behalf of myself, my heirs, my personal representatives and executors, I hereby release, discharge, indemnify and hold harmless Miami-Dade Animal Services, its agents, servants and employees from any and all claims, causes of action or demands, of any nature or cause connected with my Volunteer Agreement. This might include costs and attorney's fees and court costs incurred by Animal Services in connection with my volunteer services based on damages or injuries which might be incurred or sustained but are not limited to animal bites, accidents, injuries and personal property damage.
- 3. I understand that public relations are an important part of volunteering at Animal Services. I therefore agree on behalf of myself, my heirs, my personal representatives and my executors, to allow Animal Services to use any photographs taken of me for use in public relations efforts. Animal Services will use reasonable efforts to notify me before use, but such notification is not a condition of photographs being released for public relations purposes.
- 4. I acknowledge that I have read and fully understand the terms and conditions of the foregoing volunteer agreement and release and that I will comply with same.

\_\_\_\_\_  
Volunteer Signature                      Animal Services Representative                      Date

**PERMISSION FOR THOSE UNDER 18 YEARS OF AGE TO VOLUNTEER**

- 1. As a parent of legal guardian of the above-mentioned volunteer, I hereby give my consent to allow my child/ward to volunteer for Miami-Dade Animal Services as described within this Volunteer Agreement and Release.
- 2. I have read this Volunteer Agreement and Release and fully understand its terms and conditions. On behalf of my child/ward and myself, I agree to all terms and conditions as set out in the Volunteer Agreement and Release.

\_\_\_\_\_  
Parent/Guardian Signature                      Animal Services Representative                      Date