

Volunteer Application



Volunteer Policies:

- Volunteers must be 18 years old to work directly with the dogs
- 16-17 year olds may volunteer at the shelter without a parent/guardian present, but will need to have parental permission. That form will be given to new volunteers at the orientation session and must be returned at training.
- All volunteers will need to have a signed contract and waiver on file before volunteering. These are distributed at orientation.
- If you need to volunteer for a class requirement, scouting, court, or judicial affairs, please fill out a Community Service Application.

Personal Information for volunteer			
Last Name	First Name	Preferred name for badge	Date of birth (mm/dd/yyyy)
Email address (our preferred method of contact)		Phone number <input type="checkbox"/> check if mobile	Secondary number
Address		City	State/Zip
Emergency Contact Name and Phone Number		Employer or School (include year in school)	

Volunteer Positions (descriptions available online at http://regionalanimalshelter.org/volunteer-opportunities)
Are you able to commit to the shelter for at least six (6) months, volunteering 8-10 hours per month? <input type="radio"/> Yes <input type="radio"/> No If no, please explain:
Our weekly (one shift per week) volunteer positions are listed below. Please indicate your area of interest. <input type="radio"/> Shelter Worker <input type="radio"/> Shelter Assistant <input type="radio"/> Administrative Assistant
The positions below have more flexible schedules. Please indicate areas that might interest you. <input type="radio"/> Special Event Support <input type="radio"/> Facility Assistant <input type="radio"/> Shelter Supplies Specialist <input type="radio"/> Fostering <input type="radio"/> Vet Runs <input type="radio"/> Maintenance Crew
Other Skills
Please indicate any other skill(s) that you may have. <input type="radio"/> Animal Behavior/Training <input type="radio"/> Fun-draising <input type="radio"/> Grooming <input type="radio"/> Computer work/Data Entry <input type="radio"/> Gardening/Grounds <input type="radio"/> Medical Aid <input type="radio"/> Flyer/Poster distribution <input type="radio"/> Graphic Design <input type="radio"/> Other (please list):

Availability						
Please check day(s) and time(s) that you prefer to volunteer. You will be assigned a shift after training.						
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<input type="radio"/> Morning	<input type="radio"/> Morning	<input type="radio"/> Morning	<input type="radio"/> Morning	<input type="radio"/> Morning	<input type="radio"/> Morning	<input type="radio"/> Morning
<input type="radio"/> Afternoon	<input type="radio"/> Afternoon	<input type="radio"/> Afternoon	<input type="radio"/> Afternoon	<input type="radio"/> Afternoon	<input type="radio"/> Afternoon	<input type="radio"/> Afternoon
<input type="radio"/> Evening	<input type="radio"/> Evening	<input type="radio"/> Evening	<input type="radio"/> Evening	<input type="radio"/> Evening	<input type="radio"/> Evening	<input type="radio"/> Evening
<input type="radio"/> Varies	<input type="radio"/> Varies	<input type="radio"/> Varies	<input type="radio"/> Varies	<input type="radio"/> Varies	<input type="radio"/> Varies	<input type="radio"/> Varies
Morning shift: 7am-9am		Afternoon shift: 4pm – 6pm		Special events: Times vary		

Why do you want to volunteer with us? What do you hope to contribute and gain through volunteering?

Please tell us about any prior experience with animal shelters. What other organizations have you volunteered with, currently or in the past, if any?

What personal qualities do you have that will benefit Fulton County Regional SPCA?

Miscellaneous

Do you have any animals at home? Yes – dogs Yes – cats Yes – ferrets No
If so, you will need to have proof of rabies, distemper and/or 5-in-1 vaccine for your animals.

Do you have any concerns about allergies or medical conditions that may interfere with your volunteer duties?
 Yes No If so, the Volunteer Coordinator will talk with you at the first meeting to make sure you are placed in an appropriate position.

Have you been convicted of a crime? Yes No
If yes, please explain on a separate page and attach to this application. *Your response may not disqualify you from volunteering.*
 Yes No I understand that the Volunteer Coordinator may email me regarding orientation and/or training.
(You are encouraged to update your email account to prevent any emails from "volunteer@fcrspca.org" from going into your spam folder.)

I hereby state that the information I have provided in this application form is complete and accurate to the best of my knowledge.

Signature of Volunteer

Today's Date

Signature of Parent/Guardian (if under 18)

Today's Date

Please return application to: Fulton County Regional SPCA

Attn: Volunteer Coordinator, 117 West Fulton Street, Gloversville, NY 12078

Email: volunteer@fcrspca.org