



Tales of animals finding their forever home

# Volunteer Program Application

## Happy Tails Animal Rescue

PO Box 11433, Terre Haute, In 47801

Phone: (812)-512-7447

AaronChildress@happytailsanimalrescue.com

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

### Applicant Information .....

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Street Address (if different): \_\_\_\_\_ City: \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

Email address: \_\_\_\_\_

Your Date of Birth: \_\_\_\_\_

Are you under 14 years of age?  Yes  No

If yes, then a parent or guardian who has gone through the volunteer training must accompany you while you volunteer.

Name of the parent or guardian: \_\_\_\_\_

Are you under 18 years of age?  Yes  No

Anyone under 18 must also complete a Parent/Guardian Consent Form

Are you hoping to fulfill a court appointed community service requirement?  Yes  No

**Note: All applicants wishing to complete court appointed community service hour requirements MUST contact the Volunteer Coordinator prior to attending orientation.**

A preliminary background check will be performed.

Have you ever been convicted of a misdemeanor or felony?  Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Have you ever been investigated for an animal-related violation?  Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

**Volunteering at the Shelter** .....

What sort of duties are you interested in at the HTAR Animal Care Shelter? (check all that apply)

- Working with dogs   
  Working with cats   
  Shelter tidying   
  Emergency/Disaster Volunteer  
 Events/Education   
  Vet clinic   
  Kitten/Mom fostering   
  Puppy/Mom fostering  
 Other \_\_\_\_\_

How many hours are you willing to commit to volunteering at the Animal Shelter?

\_\_\_\_\_ hours/week    -OR-    \_\_\_\_\_ hours/month

Availability	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun
Morning							
Afternoon							
Evening							

Why have you chosen to volunteer at the HTAR Animal Shelter?

\_\_\_\_\_

\_\_\_\_\_

Have you previously volunteered at another Animal Shelter or Rescue group?  Yes  No

If yes, where? \_\_\_\_\_

When and for how long? \_\_\_\_\_

What were your duties? \_\_\_\_\_

\_\_\_\_\_

Do you currently volunteer anywhere else?

If yes, where? \_\_\_\_\_

What is your experience with general customer service (not necessarily related to animal care)?

\_\_\_\_\_

\_\_\_\_\_

**Experience with Animals** .....

Do you have any pets?                       Yes     No

If yes, what kind and how many? \_\_\_\_\_

\_\_\_\_\_

What is your experience with animal care? List types of animals and duties you performed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Health and Safety** .....

Are you allergic to any animals?  Yes  No

If yes, please list the animal(s) and your reactions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Are you allergic to any chemicals, foods or feed ingredients?  Yes  No

If yes, please list the item(s) and your reactions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Do you have any physical or other disabilities that may require special considerations in order for you to perform your volunteer duties?  Yes  No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

**Emergency contact:**

Name and Relationship to you: \_\_\_\_\_

Address: \_\_\_\_\_

Street Address (if different) \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

Thank you for your interest in volunteering at our Shelter!

**Volunteer Applicant**

**HTAR Volunteer Coordinator**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date