



Tr. Ltr. Sent _____
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VOLUNTEER APPLICATION

The Dumb Friends League encourages the participation of volunteers who support the following mission: to provide shelter and care for animals; to provide programs and services that enhance the bond between animals and people; to be advocates for animals ... speaking for those who cannot speak for themselves.

All potential volunteers must be interviewed prior to placement. We also require that all volunteers participate in our training program as part of their work experience. If you agree with our mission and are willing to be interviewed and trained, we encourage you to complete this application. The information on this form will help us find the most satisfying and appropriate job for you. Please print your responses.

Date: _____

Name: _____
Title First Middle Last Nickname

Birth date: _____
(Month) (Day) (Year)

Address: _____
City Zip

Home Phone # _____ Work Phone # _____ Cell # _____

Emergency # _____ Name: _____ Relationship: _____

E-mail: _____
(E-mail is used for correspondence with the Volunteer Services department and your home department. If requested, we will also e-mail you the VIP newsletter and League Mews, our electronic newsletter.)

Education: High school 1 2 3 4 College 1 2 3 4
 Graduate school 1 2 3 4

Name of school/college: _____

Are you presently employed? Yes No

If yes, state your work schedule: _____

Employer's name and address: _____

Industry: _____ Position: _____ Profession: _____

Previous work experience: _____

Special skills, training, interests or hobbies: _____

What kind of volunteer job are you currently interested in? _____

At which shelter are you interested in volunteering? Quebec Buddy Center

Are you available regularly each week? Yes No

Please indicate the times you would be available for work:

Monday _____

Friday _____

Tuesday _____

Saturday _____

Wednesday _____

Sunday _____

Thursday _____

Almost Any Time _____

How did you hear about our volunteer program? _____

Why are you interested in becoming a volunteer at the Dumb Friends League? _____

Describe any previous experience working with animals: _____

Describe present and previous volunteer jobs: _____

We would be interested in any further information you might wish to offer: _____

Please list two references who are not family members:

Name	Relationship	Phone Number

I give my permission to the Dumb Friends League to verify any of the information given.

X _____
(Volunteer signature)

I wish to receive VIP, the volunteer newsletter via e-mail.

I wish to receive League Mews, the electronic newsletter of the Dumb Friends League.



HOMES WITH HEARTS FOSTER CARE APPLICATION

Name: _____ Phone #: _____

Types of animals you are able to foster (check all that apply):

Adults (6 mo+):	<input type="checkbox"/> Cats	<input type="checkbox"/> Dogs	<input type="checkbox"/> Small Mammals	<input type="checkbox"/> Birds
Individual or Litters:	<input type="checkbox"/> Kittens	<input type="checkbox"/> Puppies	<input type="checkbox"/> Small Mammals	<input type="checkbox"/> Birds
Adults with Litters:	<input type="checkbox"/> Feline	<input type="checkbox"/> Canine	<input type="checkbox"/> Small Mammals	

What types of problems are you willing to work with (check all that apply)?

Behavior Socialization Health Orthopedic

Why do you want to foster? _____

What previous pet experience, if any, do you have? _____

Do you have children? Yes No If so, what are their ages? _____

Do you presently have pets in your home? Yes No If yes, how many? _____

What types? (List breed, age, and sex) _____

Are they spayed or neutered? Yes No

Do any of your current pets have behavioral concerns or chronic illnesses? Please explain:

Are your animals' vaccinations current? _____

Please describe the area where the foster animal will be cared for: _____

Do you have a fenced yard? _____

Will you isolate the foster animals from your own animals? Yes No

How will they be isolated? _____

Will the foster animals be housed indoors? Yes No

If not, please explain: _____

How many hours will the fosterlings be left alone? _____

Who, if anyone, will assist you in caring for the animals? _____