



VOLUNTEER APPLICATION				OFFICE USE ONLY	
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Last Name		First	
Street Address			Apartment/Unit #
City		State	ZIP
Phone		Cell #	

E-mail Address:

Occupation:		Employer:	
Are you a school Student	YES <input type="checkbox"/>	NO <input type="checkbox"/>	School and Grade:
Are you at least 16 years old?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Do you have any pet allergies? YES <input type="checkbox"/> NO <input type="checkbox"/>
Do you have community hours for school to complete?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	How many hours and by when?
Do you have court ordered community service?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	How many hours and by when?

If community service is court ordered, please describe the nature of your violation: *IF THIS IS LEFT INCOMPLETE, YOU WILL NOT BE CALLED.*

Why are you interested in volunteering at the Central Nebraska Humane Society?

Do you have any pets? YES NO If yes, let us know how many and their ages.

Are your animals spayed or neutered? YES NO Current on vaccinations? YES NO

Do you have any experience as a volunteer? YES NO If yes, with what organizations?

Do you have and physical restrictions, medical limitations or allergies? YES NO If yes, please

EMERGENCY CONTACT

Emergency contact person

Full Name		Relation-ship	
Address		Phone	()

Are you willing to spend at least **4 hours per month** volunteering at the shelter? YES NO

WOULD YOU BE WILLING TO ATTEND A DOG OBEDIENCE/VOLUNTEER TRAINING CLASS IF ONE WERE OFFERED? YES NO

IF YOU ARE GOING TO BE WALKING DOGS OR SOCIALIZING WITH CATS, DO YOU AGREE TO SPEND AT LEAST **30 MINUTES** WITH **EACH** ANIMAL? YES NO

WHAT VOLUNTEER ACTIVITIES ARE YOU WILLING TO PARTICIPATE IN?	
____ Maintenance/Grounds Keeping	____ Fundraisers/Special Events <i>Weekends</i>
____ Cat Socialization/Massages	____ Office Support
____ Foster Care <i>All days</i>	____ Dog Walking /Socializing
____ Grooming/Brushing	____ Gift Shop

DISCLAIMER AND SIGNATURE	
<p>I understand this application is to be a volunteer at the Central Nebraska Humane Society and not for employment. I certify that my answers are true and complete to the best of my knowledge. I understand that the CNHS is not liable for any <u>loss</u> or <u>injury</u> that I may incur while volunteering. I acknowledge that any falsification to this application can be grounds for not being approved as a volunteer. I can also be disqualified at any time due to mistreatment of animals, people, or any of the CNHS guidelines. I understand that failure to comply will result in my termination as a CNHS volunteer.</p>	
Signature	Date

INCOMPLETE APPLICATIONS ARE REJECTED