

ORANGE COUNTY ANIMAL SHELTER
11362 Porter Road Orange, VA 22960 540-672-1124
or 540-672-7047 Fax

Volunteer Application

Name: _____ Telephone # _____ (H)
_____ (W)

Address: _____ Social Security # ____ - ____ - ____

City/St/Zip: _____

E-mail Address: _____

Birthday (month and day only): _____ Are you 18 or older? * _____ *Volunteers under 18 years of age
need parent's signature.

Signature: _____ Date: _____

In case of emergency, please contact:

Name _____ Telephone # _____ (H)
_____ (W)

1. How did you hear about our organization?

2. Do you have any allergies or physical conditions which might affect your volunteer work? If so, please describe.

3. Are you a member of any other animal welfare organization? If so, please explain your participation.

4. Do you have any formal training in pet care or animal welfare? If so, please tell when, where, and type of training.

5. Have you ever had experience in dealing with the general public? If so, please explain.

6. Please describe the type(s) of volunteer work you wish to perform. (i.e.: office work, computer entry, cleaning, dog walking, animal grooming, yard work, etc.)

7. Please list the day(s) of the week and the times you would be available.

Why do you wish to volunteer for the Orange County Animal Shelter?

What are your thoughts about spaying and neutering animals?

Have you ever been found guilty of any violations pertaining to animal cruelty? If so, please describe.

Do you have any pets? If so, please tell us about them.

Do you have any questions for the Orange County Animal
Shelter?

Please list two (2) personal references and one (1) veterinary reference:

Name Business/Address Telephone #
