

UTAH ANIMAL ADOPTION CENTER VOLUNTEER APPLICATION

Thank you for helping animals by volunteering for Utah Animal Adoption Center. Knowing your skills and interests will help us ensure that you are assigned to the program or project that best helps the animals, us, and you. Volunteers working with animals must be at least 16 years of age or be accompanied by a parent. All volunteers must also provide proof that they have current Medical Insurance Coverage. Welcome!!

DATE _____
NAME _____ Birth date _____
Home Address _____ City _____ Zip _____
Telephone: Home _____ Work _____
email _____

Describe Special Skills, Training and Education with people and animals that you will bring to our organization _____

Previous Volunteer Experience(name of organization, dates, your duties) _____

Please briefly tell us why you would like to work with Utah Animal Adoption Center _____

What is your familiarity with companion animal issues such as pet overpopulation? _____

What are your views on spaying/neutering? _____

How do you define "responsible pet owner?" _____

How do you feel about /what is your experience with interacting with all types of people? _____

Describe your experience/knowledge working with companion animals? _____

What companion animals do you currently have? _____

Are you a member of any animal welfare organization? How do you participate? _____

TYPE OF VOLUNTEER SERVICE PREFERRED

(Please select those that seriously interest you:

___ Cat Caregiver ___ Dog Caregiver ___ Horses (training, hauling, transport)
___ Adoption Counselor: at which adoption site? Adoption Center ___ Layton Petsmart ___
___ Foster for a dog or cat: please complete a "Foster Home Agreement"

___ Humane Education, which geographic areas? _____
which grade levels? _____ how
often? _____.
___ Animal Caregiver (feed, socialize, pet, exercise and groom cats and clean litterboxes at Center)
___ Office (phones, filing, mailings)
___ Fundraising/event planning
___ Is there any service you can provide which is not listed? _____

Days/Hours that you are available:

Mon ___ **Tues** ___ **Wed** ___ **Thur** ___ **Fri** ___ **Sat** ___ **Sun** ___

EMPLOYMENT INFORMATION

Current Employer's Name _____

Employer's Address _____

Transportation: _____ Driver's License: _____

Auto Liability Insurance: _____

Name of Insurance Co. and Agent/Policy Number

EMERGENCY CONTACT

Name _____ Relationship _____

Address _____ Phone _____

PERSONAL REFERENCES:

1. Name _____ Phone _____

Address _____

2. Name _____ Phone _____

Address _____

MEDICAL INSURANCE:

Policy Holder's Name:

Policy #

Insurance Company Name, Address, Phone:

Volunteer Rules and Agreement

In signing this application, and before I am permitted onto the premises of the Adoption Center or any UAAC event to volunteer, I understand and agree to the following:

___ Volunteers are required to attend an orientation before starting.

___ Volunteers must be at least 16 or accompanied by a legal guardian on their shifts.

___ Volunteers are encouraged to work the same 2-4 hour shift per week, for consistency. The animals and us are relying on your help!

___ I hereby certify that I carry current Health Insurance, as required to volunteer.

___ I certify that I have never been charged or convicted of a violent crime.

___ I authorize Utah Animal Adoption Center to seek emergency medical treatment in case of accident, injury or illness while volunteering for the organization.

___ I agree to abide by the policies and procedures presented to me at the volunteer orientation and any subsequent training.

___ I will take any ideas, constructive comments, suggestions or concerns directly to the General Manager. I agree to be supervised by the staff of Utah Animal Adoption Center.

___ If communication problems develop between employees and myself, or another volunteer and myself, I will report these to the Adoptions Manager as soon as possible.

_____ I understand that if I am injured while acting as an unpaid member of the volunteer staff, that I am not covered by Utah Animal Adoption Center's worker's comp insurance.

I agree to hold Utah Animal Adoption Center and its board members and staff harmless in the event of accident or injury while volunteering for Utah Animal Adoption Center.

I agree to work for a minimum of 4 hours per month, and to inform the General Manager or Team Leader if I cannot make my commitment.

I agree to abide by Utah Animal Adoption Center's standards of professionalism, to follow its adoption guidelines and agreements, and to be punctual, well-organized and reliable when representing Utah Animal Adoption Center.

In signing and submitting this application and before stepping onto the premises to volunteer, I hereby acknowledge and understand that working with and around animals has inherent risks and I agree to hold UAAC and its staff harmless and release UAAC from liability for my actions.

Signature of Volunteer

Date

(please sign both copies and keep one for your records)

Utah Animal Adoption Center • 1955 N. Redwood Road, Salt Lake City, UT 84116 / 801-355-PETS