

Volunteer Application Profile

The Mayfield/Graves County Animal Shelter is a not-for-profit charitable organization funded primarily through donations. Our mission is the prevention of cruelty to animals and the education of current and potential pet owners about responsible ownership. We welcome the participation of those willing to represent our organization in accordance with our mission and philosophies.

Please complete the following information:

Full Name: _____

Preferred Nickname: _____

Street Address: _____

City, State, Zip _____

Phone (H): _____ (W): _____ (C): _____

E-mail Address: _____

Check One: ___ under 16 ___ 16-18 years of age ___ Over 18

How did you hear about Mayfield/Graves County Animal Shelter?

___ Friend/Family Member ___ Webpage ___ Newspaper ___ Other

What do you hope to gain from a volunteer experience at the Shelter?

Education (circle last grade/year **completed**):

High School – 1 2 3 4 College – 1 2 3 4 Graduate School – 1 2 3 4

Animal Experience:

- | | | |
|--|---|---|
| <input type="checkbox"/> Veterinary Hospital | <input type="checkbox"/> Dog Grooming | <input type="checkbox"/> Cat Grooming |
| <input type="checkbox"/> Rabbit Grooming | <input type="checkbox"/> Horse Grooming | <input type="checkbox"/> Pet Sitting/Boarding |
| <input type="checkbox"/> Boarding Kennel | <input type="checkbox"/> Farm Animals | <input type="checkbox"/> Horses |
| <input type="checkbox"/> Animal Breeding | <input type="checkbox"/> Dog/Cat Shows | <input type="checkbox"/> Dog Obedience/Training |
| <input type="checkbox"/> Dog Agility Training | <input type="checkbox"/> Exotic Animals | <input type="checkbox"/> Emergency Services |
| <input type="checkbox"/> Wildlife Rehabilitation | <input type="checkbox"/> Other: _____ | |

Other Experience, Special Skills, Strengths, and Talents:

- Gardening/Landscaping Sales Clerical Farm Equipment

- Graphic Arts Painting Carpentry Public Relations
 Web Design Crafts Writing Writing/Editing Articles
 Photography Sewing Calligraphy Marketing
 Fund Raising/Development Special Events

Please indicate any specialized equipment/resources you have available, firsthand experience working with animals or additional skills, languages spoken or specialized training:

Describe any current or past volunteer positions:

Are you currently employed? Yes No

Employer's name and address _____

What kind of work do you do?

When are you available to volunteer?

WHEN AVAILABLE	MON	TUE	WED	THU	FRI	SAT	SUN
Afternoon			CLOSED				CLOSED
Evening			CLOSED				CLOSED

(Circle one.) Every week Every other week Once a month Special events

Areas of interest (check all that apply):

Animal care and comfort		Office support		Gardening	
Animal health care assistant		Pet transport		Grooming	
Cat socialization		Fundraising		Special Events	

Dog walking		Humane Education		Foster Care	
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Emergency Contact:

Name: _____ Relationship: _____ Phone 1 () _____
 Phone 2 () _____

Name: _____ Relationship: _____ Phone 1 () _____
 Phone 2 () _____

References that are not family members (name and phone number)

1. _____
2. _____
3. _____

I, (Volunteer name) _____ confirm that the information provided on this application is correct. I understand the commitment involved and acknowledge that my services are offered at my own risk. I agree to adhere to Mayfield/Graves County Animal Shelter policies and carry out my duties as a Shelter volunteer effectively.

I give my permission to Mayfield Animal Shelter to verify any of the information given.
 Signature _____ Date _____

TO BE COMPLETED IF A MINOR UNDER 16

As a parent or guardian, I understand that my son/daughter volunteers at his/her own risk. I hereby grant permission for him/her to perform volunteer work for the Mayfield Animal Shelter.

Parent signature _____ Date _____
 Witness _____ Date _____