

Humane Society of Whitley County

951 S. Line Street
Columbia City, IN 46725
(260) 244-6664

Volunteer Survey

Last Name: _____ First Name: _____ Middle Int. _____
Street Address: _____ Apt. #: _____
City: _____ State: _____ Zip: _____
Home Phone: _____ Business Phone: _____
*Cell Phone: _____ Pager Number: _____
*E-Mail address: _____ Fax Number: _____
I prefer to receive calls at: _____ Cell _____ Home)) _____ Business _____ Either
_____ Days _____ Evenings _____ Weekends _____ No Preference

I. Skills and Interests

1. Field of Study (check all that apply)

_____ High School Graduate
_____ Undergraduate Degree-

School: _____ Major: _____ Graduate Degree _____

School: _____ Major: _____ Graduate Degree _____

2. *Employment Information*

I am: _____ Employed _____ Not Employed _____ Retired _____ Student

Employer's Name: (Or

School) _____

Occupation: _____

Street Address: _____

City: _____ State: _____ Zip: _____

_____ My employer offers a matching gifts program.

_____ My employer offers a time-off program for volunteers.

3. Do you have any previous volunteer experience? _____ Yes _____ No

If yes, when, where and what type of work? _____

4. List special skills, interests or hobbies: _____

5. Do you speak a foreign language?

_____ Yes _____ No If yes, what language? _____

* **OPTIONAL**

Volunteer Survey

II. Preference in Volunteering

1. Is there a particular type of volunteer work in which you are interested? (Please check all that apply.)

- Special Events Newsletter Public Relations/Marketing
 Public Speaking/Fund-raising Maintenance
 Animal Care Education
 Visits to Nursing Homes School Programs
Other _____

Shelter Volunteers:

- Cleaning Kennels Laundry Dishes/Food Prep Room
 Bathing/Grooming Phones Greeting Customers
 Office/Filing Daily Cleaning/Sweeping/Moping/etc.
 Adult Youth Volunteer Leader (2 – 4 children ages 10 – 16)
Other _____

III. Availability

1. At what times are you interested in volunteering?

- Am Flexible Prefer Weekdays Prefer Weekends
 Prefer Evenings Prefer Days Other _____

2. Do you have access to an automobile you can use for volunteer work? Yes No

3. Do you have access to a truck or trailer that you can use for hauling? Yes No

4. Do you have any physical limitations or are you under any course of treatment which might limit your ability to perform certain types of work? Yes No

If yes, please explain: _____

IV. Additional Information

1. Have you ever served as a volunteer with us before? Yes No
If yes, what year and what type of job? _____

2. Is anyone else at your address already a volunteer? Yes No

3. Are you a member of the Humane Society of Whitley County?
 Yes No

If no, would you like to be?

Yes No

4. How did you find out about our volunteer program? _____

5. Why do you wish to volunteer for the Humane Society? _____

6. Please list two (2) non-family references whom we might contact:

- a) _____ Phone: () _____ b)
_____ Phone: () _____

Humane Society of Whitley County
951 S. Line Street
Columbia City, IN 46725
(260) 244-6664

Volunteer Survey

V. *Emergency Contact*

In the event of an emergency, please notify:

Name: _____ Relationship: _____

Home Phone: _____ Business Phone: _____

Cell Phone: _____ Pager: _____

I certify that the statements made in this volunteer information sheet are true and correct, and have been given voluntarily.

I understand that I will not be paid for my services as a volunteer.

I have received a copy of the Humane Society of Whitley County Volunteer Handbook and acknowledge my obligation to read, understand and comply with its contents.

Applicant's Signature

Date:

Society's Personnel

Date: