

Purrfect Companions of Norfolk Cat Rescue and Adoption 19 Brantford Road Delhi ON N4B 1V5 Phone: (226) 227-8289 Email: purrfectcompanions01@vahoo.ca

VOLUNTEER APPLICATION

Thank you for your interest in volunteering with Purrfect Companions of Norfolk Cat Rescue and Adoption. We depend on the help of others in the community to help us house and look after the cats/kittens that are in our care until we can find them their loving forever homes. While all people asking to volunteer in this capacity are obviously interested in the health and welfare of the animals, not all types of volunteer work may be suitable for an individual. Therefore, we ask that you be completely honest with all of your answers so that we can help you identify what type of volunteer work you would be willing and capable of doing.

A. VOLUNTEER APPLICANT DETAILS:

First Name:	Last Name:	Home Phone:
Address:		Cell Phone:
Email:		

I certify that I am over 18 years of age as of the date of the application. YES / NO

Anyone interested in volunteering who is under the age of 18 must be accompanied by an adult in order to start volunteering. If you are under 18, please provide the name and contact information of the responsible adult:

B. VOLUNTEER QUESTIONNAIRE:

(1)	Are you available for specific days of the week?	(please check all that apply)
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- Ο Sunday
- Monday
- Tuesday
- 00000 Wednesday
- Thursday
- Friday
- Ο Saturday

(2)	Are you willing to make at least a three-month commitment to the volunteer program?	YES / NO
(3)	Do you have any limitations? (heavy lifting, walking, allergies, etc)	YES / NO
	If yes, please explain:	

(4) Have you had any FORMAL EDUCATION in pet care or animal welfare?

Where?		
When?		
Type (s) of tra	aining:	

- (5) Do you have experience volunteering at other organizations? If yes, please name the organisation and describe your experience.
- (6) Do you have specific animal welfare concerns?
- (7) How did you find out about the volunteering opportunity and why do you wish to volunteer at Purrfect Companions of Norfolk County Cat Rescue and Adoption?
- (8) What is your expectation of volunteering with this rescue?
- (9) What are your thoughts about spaying and neutering animals?
- (10) Do you have any pets? If so, please tell us about them.

C. FOR STUDENT VOLUNTEER APPLICANTS ONLY:

Are you a High School Student requiring volunteer hours to graduate?	YES / NO	
If yes, please state the school and the contact teacher:		

If yes, how many hours do you require?

D. OVERVIEW OF VOLUNTEER TASKS:

- Clean kennels, Clean litter boxes, Ensure bedding is clean and dry, Wash dishes, Feed and water the cats, Wipe and disinfect dirty surfaces.
- Sweeping and mopping floors, Removing garbage, Sanitizing dishes, litter boxes, scoops, brooms, etc.
- Cleaning and organizing kitchen, bathroom, office, and storage areas on a weekly or as required basis.
- Cat Laundry

E. REFERENCES: Please provide at least two references:

First Name:	Last Name:	Home Phone:	
Relationship:	ationship: Cell		
-			
First Name:	Last Name:	Home Phone:	
Relationship:		Cell Phone:	

F. TERMS AND CONDITIONS:

I have read this application agree to abide by all of the policies and procedures of Purrfect Companions of Norfolk County Cat Rescue and Adoption.

I understand that I may, at any time, with or without cause, be removed from my position as a volunteer at the sole discretion of the rescue's President.

I understand that I will be required to complete the <u>Volunteer Waiver</u> and sign the <u>Statement of Purpose and</u> <u>Code of Conduct</u> prior to the start of any period of volunteer service.

Applicant's Signature

Witness Signature

Date

Once you make this commitment please remember that the animals and other volunteers are counting on your dedicated participation. We will contact you soon with a decision.

For office use only:

Code Number: _____

Volunteer Name: _____

Interview scheduled for:		by	
Applicant Approved to become a Volunteer:	YES / NC	by	
Applicant Contacted:	YES / NC	on	
Orientation Date:			
Volunteer Waiver completed:	YES / NC	on	
Statement of Purpose and Code of Conduct completed:	YES / NC	on	
Start Date:			
If student, teacher contacted?			
Comments:			

Volunteer Application Distribution:

Original – maintained on the office file