**Bond County Humane Society (BCHS)**

**Volunteer Application Guidelines**

The following guidelines have been established to provide for the use of volunteers at Bond County Humane Society (BCHS).

**APPLICATION –** Persons wishing to perform volunteer services at BCHS must complete an application for acceptance. Applicants must comply with the following application procedures.

1. Complete an application form provided by BCHS.
2. Consent to criminal history check, as well as any other background investigation deemed necessary by BCHS.
3. Complete and sign a liability waiver provided by BCHS.
4. Volunteers must be 11 years of age or older. Volunteers younger than 11years of age must be accompanied by a parent or guardian. Volunteers under the age of 18 will require written permission of parent(s) or guardian(s).

Completed applications should be mailed to:

Bond County Humane Society

2510 S. Elm St.

Greenville, IL 62246

**APPROVAL –** The BCHS Executive Board shall approve or disapprove the application.

BCHS may terminate any volunteer if they deem it to be in the best interest of BCHS.

1. Upon approval, the applicant will be notified of the designated location for training of the position in which BCHS feels is most appropriate.
2. BCHS officials will discuss with the applicant hours of assignments and notify all other personnel that the volunteer has been authorized to assist.

**PARTICIPATION & RULES OF CONDUCT**

1. Volunteers shall not handle any cash transactions.
2. Volunteers shall at all times adhere to BCHS established guidelines and abide by instructions given by BCHS officials.

The applicant hereby acknowledges having read the above program guidelines and agrees to abide by those guidelines.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Volunteer Applicant Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parental Signature (if under 18 years of age) Date

**BOND COUNTY HUMANE SOCIETY**

**VOLUNTEER APPLICATION**

**Our Mission Statement:** Bond County Humane Society (BCHS) exists to provide temporary sanctuary for unwanted, lost and neglected animals for ultimate placement in loving and responsible homes. BCHS is a nonprofit charitable organization committed to promote animal welfare through education and actively encourage pet population reduction. We are dedicated to creating, in Bond County, an environment that enhances awareness of homeless animals and support for the humane treatment of these animals.

BCHS is based on the core value that all animals deserve to be treated in a humane manner. Dogs and cats with no home need temporary shelter until a permanent, loving home can be found for them. We believe that awareness and education allows animals and humans to come together, for the benefit of both.

If you agree with our mission statement and have read the accompanying material please complete this application. This form will help us determine the amount of training you will need and to identify the most appropriate place for you in our volunteer program.

**Please Print Today’s Date**\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last First

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street City State Zip

Home Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell/Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Address

Work Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ May we call you at work? \_\_\_\_\_

Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Education (Last year of school completed):\_\_\_\_\_\_\_\_

Age Group: 14-25 \_\_\_ 26-35 \_\_\_ 36-60\_\_\_ over 60\_\_\_

Emergency Contact:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship:\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work/Other Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. What volunteer position(s) are you interested in? (Check all that apply)

\_\_ Animal Care: \_\_ Canine \_\_ Feline

\_\_ Pet Adoption Events

\_\_ Animal Transport

\_\_ Dog Walker

\_\_ Special Events/ Fundraising

\_\_ Foster Home

\_\_ Clerical/ Answering Phones

\_\_ Photography

\_\_ Lawn care

\_\_ Building maintenance

2. Do you have any special skills/ talents/experience that would benefit you in the position

you are applying for? \_\_\_\_\_. If yes, please explain.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Do you have any physical, medical, or psychological limitation or disability that might

prohibit you from participating in any specific area of the program (i.e. heart condition,

back injuries, allergies, etc.? \_\_\_\_\_. If yes, please explain.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Do you have any volunteer experience? \_\_\_\_\_. If yes, please explain.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Describe any previous experience training or handling animals.

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6. If you are volunteering to care for animals, what type of animals are you most

comfortable handling?

Canine \_\_ Feline \_\_

7. Do you have fear of any animals? \_\_\_\_\_. If yes, please explain.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Do you currently have companion animals of your own? \_\_\_\_\_.

9. Why do you want to perform volunteer work at BCHS? What do you hope to gain by

working at BCHS? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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10. Availability (Please check one that best describes your situation.)

\_\_\_ Not working/ Retired/ Disabled

\_\_\_ Working Part-time

\_\_\_ Available Weekends Only

\_\_\_ Working Full-time

11. How many hours per week/month are you willing to volunteer? \_\_\_\_\_\_ per \_\_\_\_\_\_

12. What is the duration of your commitment?

\_\_\_ One Year or More

\_\_\_ Six Months

\_\_\_ Three Months

13. Have you ever been convicted of a misdemeanor or felony? \_\_\_\_ If yes, please

explain. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**References:**

Please provide list three non-family references who know you and who will attest to your character, skill, and dependability.

|  |  |  |
| --- | --- | --- |
| Name/Address | Phone | Length of  time known |
|  |  |  |
|  |  |  |
|  |  |  |

I hereby declare that the information I have provided is true to the best of my knowledge.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date