

**St. Charles County Pet Adoption Center
Volunteer Application
636-949-7387 ext. 7777**

Please be aware:

- Volunteers are expected to abide by the policies and procedures of the Pet Adoption Center and of St. Charles County Government. Failure to abide by these policies can result in the termination of the volunteer's service.
- Volunteers may be required to go through a screening process that may include interviews and reference checks. This process may also include an orientation and safety briefing program.
- Volunteers must be at least 17 years of age to work with the Pet Adoption Center.
- Volunteers can assist at the Pet Adoption Center during public business hours only, and staff reserves the right to set a minimum/maximum number of hours available for volunteer service as needed.
- I understand that I may cancel my volunteer participation at any time and that the County may terminate a volunteer from his/her duties at any time.

Name _____

Address _____

City/State _____ Zip _____

Home phone _____ Cell phone _____

Date of birth (month/day/year) _____

Email Address _____

Current availability status (please mark):

Student ____ (which school _____)

Community service ____ (reason/hours required _____)

Employed ____ (full time/part time - please circle one)

Retired/Not employed ____

(APPLICATION CONTINUED ON PAGE 2)

Previous volunteer experience (please list dates/organization/duties, where possible)

Do you have any special skills/training that might apply to your volunteer duties with us (animal care, clerical, computer, etc.)?

How did you hear about our program? (if referred, please list the person's name and phone)

Briefly describe why you are interested in volunteering with the Pet Adoption Center

In case of emergency, please contact:

Name _____ Phone _____

Relationship _____

How many hours would you be able to contribute?

Per week _____

Per month _____

I understand that this is an application, and it does not ensure my volunteer service with the Pet Adoption Center.

Signature of applicant _____

Date applied ____/____/____

Signature of parent/guardian _____

(signature required if applicant is under 18 years of age)

Parent/Guardian's printed name and daytime phone number _____

"Volunteers don't get paid, not because they're worthless, but because they're priceless."

Sherry Anderson