

ULSTER COUNTY SPCA VOLUNTEER APPLICATION

20 Wiedy Road
Kingston, New York 12401
845-331-5377
Email: info@ucspca.org
Website: www.ucspca.org

Thank you for your interest in the Ulster County SPCA. Volunteers with a variety of skills are welcomed and needed at our shelter. Please complete this application completely then read and sign the agreement. An orientation is mandatory before beginning to volunteer at our shelter. Thank you.

Note: You must be at least 18 years of age to volunteer at our shelter.

PLEASE PRINT ALL INFORMATION

Name _____ Today's Date _____

Home Address _____

Home Phone _____ Cell _____

E-Mail Address _____

Employer's Name _____ Occupation _____

Employer's Address _____

Person to notify in case of emergency _____ Relationship _____

Home Phone _____ Cell _____

List three references (include vet references if possible)

Name	City, State, Zip	Telephone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Areas of Interest (Circle all that are applicable)

Animal Care

- Dog Walking
- Socializing
- Dog Bathing and/or Brushing
- In-shelter Dog Training
- Working with Cats

Fund Raising

Special Events (i.e. adoption events, etc.)

Recruiting

- Financial Supporters

Miscellaneous

- Happy Paws Thrift Store
- Photography
- Web Site Development

Maintenance

- Lawn Care and/or Landscaping
- Laundry
- Painting
- Basic Maintenance and Repair

OTHER _____

Please answer the following questions:

1. Have you been referred to the Ulster County SPCA (UCSPCA) through a court-ordered community service program? YES ___ NO ___ If YES, **STOP:** You will need to contact the Executive Director before proceeding with this application.

2. Are you volunteering to fulfill a requirement for:
School ___ Church ___ Community Group ___ Other ___
Number of hours needed to complete requirement _____

3. Do you have any physical, pre-existing medical limitations that might hinder you from participation in any area of our Volunteer Program (e.g. heart condition, back injury, allergies, etc.)? YES _____ NO _____

4. Day and Time you are available to volunteer _____
Shelter hours are Tuesday – Sunday, 11:30 – 3:30
The shelter is closed on holidays
Fund raising takes place at different locations and times
5. Do you have any special skills or experiences you would be willing to use while volunteering? If YES, please explain _____
6. Have you ever worked or volunteered or worked at the UCSPCA? YES _____ NO _____
If YES, When _____
7. Have you ever volunteered with any other organization? YES _____ NO _____
If YES, please explain _____
8. Have you had any formal education and/or experience in animal care or welfare?
YES _____ NO _____ If YES, please explain _____

9. Do you have any pets now? YES _____ NO _____
If NO, have you ever had any pets? YES _____ NO _____
10. Which do you prefer to work with? DOGS CATS (please circle)
11. Have you ever adopted an animal from the UCSPCA? YES _____ NO _____

All of the information I provided in this application is true and correct. If any of the information changes I will advise you promptly. If any information is false, I forfeit the right to be accepted as a volunteer with the UCSPCA.

Applicant Signature _____ Date _____

Please Print Name _____