

Humane Society Greene County
183 Jefferson Road, Waynesburg, PA 15370
Phone: 724-627-9988 Fax: 724-627-4160
Website: www.greenepet.org

HUMANE SOCIETY GREENE COUNTY VOLUNTEER PROFILE INFORMATION

Dear Potential Volunteer:

Thank you for your interest in "lending a helping paw" at the Humane Society of Greene County. It is because of volunteers such as you that we are able to give homeless and abused animals the proper care and love while they are housed at our facility.

In order to help us identify how your skills and availability may best be used, please complete the below information to identify your interests, talents, availability and contact information in helping the shelter.

After you have completed this profile, please return it to the shelter by:

- Dropping it off at the Humane Society shelter facility
- Mailing to:
Humane Society Volunteer Program, 183 Jefferson Road, Waynesburg, PA 15370
- Faxing to:
Humane Society Volunteer Program at (724) 627-4160
- E-mail to:
Humane Society Volunteer Coordinator at HUMANEGREENE@WINDSTREAM.NET

If you have questions about volunteering, please contact the Executive Director at telephone (724) 627-9988 or via e-mail at HUMANEGREENE@WINDSTREAM.NET

Thank you for taking the time to complete this profile. Your form will be reviewed by our Volunteer Coordinator Team, and you will be contacted shortly to discuss current shelter volunteer needs and the variety of ways that you can help.

HUMANE SOCIETY VOLUNTEER PROFILE FORM

Date: ____ / ____ / ____

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

• Primary Phone Number: (____) _____ - _____ Home / Work / Cell / Other

Best time to call: _____

• Other Phone Number: (____) _____ - _____ Home / Work / Cell / Other

Best time to call: _____

• E-Mail Address: _____

Do you check your e-mail frequently? Yes / No

May we contact you via e-mail? Yes / No

• What is the best way to contact you: Phone / E-mail / Other (please explain): _____

VOLUNTEER AGE LIMITS:

Generally, volunteers wishing to work at the shelter facility must be 21 years of age at the time of volunteering.

Are you 21 years of age? Yes / No

Date of Birth: ____ / ____ / ____

COMMUNITY SERVICE (COLLEGE STUDENTS):

Organization Name: _____ Hours Needed: _____

Supervisor's Name: _____ Contact Info: _____

Are you volunteering: ___ independently ___ with a group (please indicate group name) _____

TELL US ABOUT YOU:

Do you have any special talents, experience, or areas of expertise that you think might be helpful to the shelter?

Yes / No If yes, please describe: _____

What tasks, duties or projects would you enjoy doing as a volunteer with us? _____

In addition to working at the Shelter would you be willing to help in fund-raising activities such as Dog Gone

Pool Party, Furry Friends 5K, or other special events? Yes / No

Describe any other area(s) for which you are interested in volunteering that were not mentioned? _____

WHEN WOULD YOU BE AVAILABLE:

To help determine how your talents may best be used, please detail your availability for volunteering below. Please indicate the times you expect you will volunteer:

- _____ Hours daily
- _____ Hours once per week
- _____ Hours several times per week
- _____ Hours monthly
- _____ As my schedule allows or as needed - Please describe: _____
- _____ Other: _____

Please tell us what day(s) and time(s) you think you would generally be available to volunteer?

IF WEEKLY:

- MONDAY: _____ hours daily : between the hours of _____ am/pm AND _____ am/pm
- TUESDAY: _____ hours daily : between the hours of _____ am/pm AND _____ am/pm
- WEDNESDAY: _____ hours daily : between the hours of _____ am/pm AND _____ am/pm
- THURSDAY: _____ hours daily : between the hours of _____ am/pm AND _____ am/pm
- FRIDAY: _____ hours daily : between the hours of _____ am/pm AND _____ am/pm
- SATURDAY: _____ hours daily : between the hours of _____ am/pm AND _____ am/pm
- SUNDAY: _____ hours daily : between the hours of _____ am/pm AND _____ am/pm
- OTHER HOURS – Please describe: _____

YOUR PREFERENCES (check all that apply):

- | | |
|--|---|
| _____ I prefer to work only with cats | _____ I prefer to do tasks at home |
| _____ I prefer to work only with dogs | _____ I do not want to work at the shelter site and would prefer to volunteer at off-site activities |
| _____ I would work with either cats or dogs | _____ I would like to help transport animals in my own vehicle to alternate adoption sites |
| _____ I would rather not work with the animals | |

Other comments: _____

CURRENT ACTIVITIES:

Below is a list of our current volunteer activities. Please check those in which you are currently interested:

- _____ Walking dogs
- _____ Exercising cats
- _____ Washing or grooming cats or dogs
- _____ Cleaning cages and the kennel areas

- _____ Providing food and water to the animals
- _____ Helping with administrative tasks
- _____ Helping with newsletters
- _____ Front Desk Volunteer (answering phones, greeting visitors)
- _____ Fostering pets in your home
- _____ Lawn Care/Grounds Keeper (Mowing, raking, gardening, and planting)
- _____ Maintenance (Painting, carpentry, plumbing and miscellaneous fix-it projects.)
- _____ Taking digital photos of animals for placement on website
- _____ Transporting animals to other shelters or alternate adoption sites

There may be volunteer activities which you can perform on your own at home, off the shelter site. Would you be willing to help with these tasks? Yes / No

Describe any special skills/talents that you would like to put to use? _____

Do you have any previous experience working with animals? Yes / No
 Please explain: _____

Are there any duties that you prefer NOT to perform? Yes / No
 Please describe: _____

TELL US ABOUT YOUR PETS:

- What kind of pet(s) do you currently have? • # _____ of Cats • # _____ of Dogs
- Other: _____ • Are your pets spayed or neutered? Yes / No
- Are your pets up to date on their annual vaccinations/shots? Yes / No

Do you have any allergies, physical disabilities or other limitations which may require special accommodation or restrict your volunteer activities? Yes / No

If yes, please explain: _____

Besides a love for animals, what would you like to get out of volunteering with us? _____

Additional Comments: _____

THANK YOU FOR COMPLETING THE VOLUNTEER PROFILE FORM.

WAIVERS AND AGREEMENTS

If the volunteer is under the age of 18, a parent or legal guardian must sign all waivers and agreements.

Rabies Waiver

The Humane Society of Greene County (HSGC) feels it is important for all staff and volunteers who handle animals to be aware that a pre-exposure **rabies vaccination** series is available. If staff or volunteers have questions about the pre-exposure **rabies vaccination**, they should consult a physician at their own expense and make the best decision for them. By signing below, I release HSGC from all responsibility that may occur because of my not pursuing the pre-exposure **rabies vaccination** series, and I understand that whatever decision I make regarding this vaccination is my own decision and that I made it at my own risk.

Print Name _____

Signature _____ Date _____

Volunteer Agreement

- I understand that drugs and alcohol of any kind are not permitted, and if found with them, I will be terminated as a HSGC volunteer.
- I understand that I am not authorized to represent HSGC in any official capacity with the media.
- I give HSGC permission to use photos or videos taken of me and that they will become the property of HSGC and may be used at any time without notice or compensation.
- I understand that I may need to attend orientations before being able to volunteer.
- I authorize HSGC to seek emergency medical treatment in case of injury or accident.
- I understand and voluntarily assume the risks associated with the activities and do not hold HSGC responsible for any injury to my person or property.

Print Name _____

Signature _____ Date _____

Thank you for volunteering. Your application will be reviewed by our Volunteer Coordinator Team and you will be contacted as soon as possible.