

OAKVILLE AND MILTON HUMANE SOCIETY
VOLUNTEER APPLICATION

PERSONAL INFORMATION: email: _____

Name: _____

Address: _____

City: _____ Postal Code: _____

Phone (res): _____ Phone (cell): _____

Occupation/Employer: _____ May we call you at work? **Yes** **No**

Phone (work): _____

INFORMATION ABOUT VOLUNTEERING:

Volunteers must be 18 years old or above

Are you 18 years of age or older? **Yes** **No** (circle one)

Are you able to commit to a minimum of one visit per week for at least six months?

What days and times are you available to volunteer? Please be specific:

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Hours available in the a.m. (i.e. 8-12)							
Hours available the p.m. (i.e. 3-5pm)							
Hours available in the evening	Shelter Closed At 5pm	Shelter Closed At 5pm	Shelter Closed At 5pm			Shelter Closed At 5pm	Shelter Closed At 5pm

How long do you intend to stay as a volunteer at OMHS? _____

Do you wish to volunteer because you are **required to** (example: Court or school)?

Yes No (circle one)

If yes, please indicate the number of hours needed? _____

Were you referred to us by any individual or organization? **Yes No (circle one)**

If yes, please identify the person or organization responsible for making the referral:

What position are you applying for: _____

Why do you want to volunteer for the Oakville & Milton Humane Society?

What education, skills or abilities would you like to contribute to the Oakville & Milton Humane Society?

Do you have any health concerns or limitations which might impact on your ability to work at the shelter? If yes, please explain:

Do you have any allergies which might be a factor in an animal shelter setting?

Have you had a tetanus booster in the last 10 years?

Have you had pre-exposure rabies vaccine? (Note: not required to volunteer)



Do you have pets at home? If so, please list them (Name, Breed, Age) and the dates of their last vaccinations:

If you are applying for a position volunteering with animals, please explain your experience with each type of animal.

Please let us know if there is any other information you would like to share with us regarding your animal experience.

I give my permission for the Oakville & Milton Humane Society to contact me:

YES

NO

Signature of applicant: _____ Date _____

If you have any questions regarding this application, please contact:

*Jackie MacKenzie
Volunteer Coordinator
Community Outreach and Education Department
Oakville and Milton Humane Society
445 Cornwall Road, Oakville, Ontario L6J 7S8
(905) 845-1551 ext 138*