

Date: _____

**Kennebec Valley Humane Society
Volunteer Application**

10 Pet Haven Lane, Augusta, ME 04330
207-626-3491 x 107



**Kennebec Valley
Humane Society**

Please view the “Becoming a Volunteer” video on our website prior to submitting this application. Applications without the code from the video are considered incomplete. **Note:** Age requirement of 16 years. Volunteers between 12-15 years of age may volunteer as a team with their parent or guardian. Children under the age of 12 are not permitted to volunteer but can participate in our reading program.

Last Name _____ First Name _____ MI _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Cell Phone _____ Email _____

Age _____ Date of Birth _____

Parent/guardian Name & phone (if under 18) _____

What is the best way to contact you? [] Home phone [] Cell phone [] Email

What days are you available for volunteering? _____

Code from Becoming a Volunteer Video _____

Please circle the volunteer opportunities you would like to participate in: **CHOOSE ONLY TWO**

Cat kennel cleaning (8am)

Building maintenance

Small animal care (8am)

Dog walking (8am and 2pm)

Event support

Laundry/dishes upkeep

Requires ability to walk strong dogs

Cat socializing (12pm - 2pm)

Lawn/yard care

Dog field trips

Outreach events (nursing home visits, adoption events)

Personal (Experience, skills, history)

Do you have relevant previous experience or special skills? Please describe:

History - Please answer honestly (KVHS reserves the right to preform background checks on prospective volunteers)

Have you ever been convicted of a crime? [] Yes [] No

Have you ever been arrested? [] Yes [] No

If yes, please list the offenses and dates:

Date: _____



**Kennebec Valley
Humane Society**

Emergency Information

Do you have health insurance? [] Yes [] No

Company _____

Policy # _____

In case of an emergency, who can we contact?

Name _____

Phone number _____

Address _____

Relationship _____

Please list any allergies:

Are there any medical, physical or other limitations on the types of volunteer work you can perform?

[] Yes [] No

If yes, please explain:

COVID-19

Have you received a vaccine for covid-19? [] Yes [] No

Community Service, Vocational Rehabilitation, Aspire, etc. If you need Community Service hours for high school or college graduation, please write the school, number of hours needed and intended date of completion.

Note: If you were referred to KVHS for court-ordered Community Service write the offense, hours required and date of completion intended.

If you will be volunteering with a Vocational Counselor or Case Manager, he or she must fill out and submit an application as well. Please provide the Vocational Counselor or Case Manager's information to assist with matching up the applications.

Note: Each counselor or case manager who will be working with you needs to complete a volunteer application and participate in the orientation and training with you. Counselors or casework that have not been through volunteer orientation and training will not be able to volunteer with you. It will be expected that the counselor accompany their client at all times during volunteer activities.

Name _____

Title and company _____

Phone Number _____

Date: _____

Volunteer Contract



**Kennebec Valley
Humane Society**

1. I have completed this application and answered all information honestly and accurately. I give permission to the Kennebec Valley Humane Society to verify any information given on this volunteer application.
2. I have watched the volunteering overview video and understand that I must follow all protocols and direction provided by staff and Volunteer Manager. Failure to do so will result in loss of volunteer status.
3. I understand that KVHS reserves the right to conduct background checks on any applicant applying for a volunteer position at KVHS.
4. In the event of an emergency, I hereby give permission for KVHS to seek emergency medical care for me.
5. I hereby agree that the KVHS is not responsible for any injury, accident, or sickness which may occur to me in connection with the volunteer program. KVHS is also not responsible for loss or damaged property.
6. I understand that I am required to wear a mask inside the shelter if I am not fully vaccinated against COVID-19. Masking guidelines are subject to CDC guideline changes.
7. I understand that application approval will be based on the current volunteer needs of KVHS.
8. I agree to sign up for volunteer shifts through the scheduling methods provided by KVHS. If I am unable to attend my volunteer shift I will contact the volunteer coordinator immediately. Repeated failure to attend will result in loss of volunteer status.
9. **Confidentiality**
It is expected that Kennebec Valley Humane Society volunteers will not breach any private or confidential information outside of KVHS concerning the animals, abuse cases, customer information, business decisions, and policies of the organization. This includes photographing animals that are not available for adoption. I agree to comply with the Kennebec Valley Humane Society confidentiality policy.

Volunteer Signature

Date

Parent/Guardian Signature (required if under 18)

Date

For office use only:

Date accepted or denied (reason): _____

Date applicant was contacted: _____

Scheduled orientation date: _____