



Before completing this application, please watch the "Becoming a Volunteer" video on our website. You will need information from this video to finish your application. Therefore, we recommend that you complete the application in the comfort of your own home. After we review your application, we will contact you via email or phone to discuss current volunteer opportunities and determine if we have a position that aligns with your skills and interests. This process could take 1-2 weeks.

Prospective child volunteers aged 12 to 15 may volunteer alongside a parent or guardian. Two applications are required: one for the child and one for the parent or guardian.

For prospective volunteers who have support staff, two applications are also needed: one for the staff member and one for the client.

Code from "Becoming a Volunteer" video on www.pethavenlane.org/volunteer

Full Legal Name

Address

Zipcode  Email

Home Phone

Cell Phone

D.O.B

Health Insurance Company

What days are you available for volunteering?

Mon. Tue. Wed. Thu. Fri. Sat. Sun.

What times are you available for volunteering?

8am 9am 10am 11am 12pm 1pm 2pm 3pm

Emergency Contact Phone

Emergency Contact Name & Relationship

Parent Name & Phone (if under 18)

Please pick only two volunteer activities you are most interested in:

- Dog Walking
- Cat Kennel Cleaning
- Cat Socializing
- Maintenance
- Laundry and Dishes
- Fundraising
- Event support (adoption events, community visits, etc.)
- Small Animal Socializing

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

Why are you interested in volunteering at KVHS? Please describe:

If you are completing required volunteer hours for educational purposes, please list your school, the amount of hours needed, and the date hours need to be completed. *N/A if this doesn't apply*

If you are completing required volunteer hours for court ordered community service, please list the offense, the amount of hours needed, and the date the hours need to be completed by. *N/A if this doesn't apply*

If you will be volunteering with a Vocational Counselor, Case Manager, DHP, or BHP, they must fill out and submit an application as well. Please provide that person's name, phone number, and company below. *N/A if this doesn't apply*

Are there any medical, physical or other limitations on the types of volunteer work you can perform? Please explain and include any allergies. *N/A if this doesn't apply*

Please disclose any previous arrests and convictions. Please note: KVHS does reserve the right to background check potential volunteers and staff. *N/A if this doesn't apply*

I do understand that my services (or child's services if the volunteer is under eighteen years of age) are being donated to the Kennebec Valley Humane Society on a purely volunteer basis, without compensation. I understand that these voluntary services will be performed at the shelter, or any other locations associated with the volunteer program (events, off-site visits, etc.). In doing so I (or my child) will act entirely on one's own initiative, risk and responsibility within the discretion of shelter personnel. I am aware of the dangers, which are inherent in the course of volunteer work, including (but not limited to):

- Bites or scratches from cats, dogs, rabbits, rodents, birds
- Being knocked down or pulled excessively by a dog
- Injuries relating to wrists/hands/fingers from leashes
- Slips, trips, or falls resulting from wet floors
- Hitting heads on objects such as kennel doors, wall boxes, hose boxes etc.
- Cleaning materials or water in eyes
- Injuries from kennel doors, equipment, etc.
- Flea or tick bites, ringworm infestation, brown tail moths, Internal or external parasites
- Zoonotic illnesses (human illnesses contracted by animals)
- Animal illness exposure to animals in the home
- Injuries related to lifting
- Injuries caused by grooming equipment
- Exposure to cleaners, latex gloves, bleach, parasite control products
- Exposure to or incidents relating to the public (outbursts, inappropriate contact)
- Exposure to or incidents relating to volunteers (outbursts, inappropriate contact)
- Damage to clothing or other personal items
- Exposure to COVID-19
- Exposure to peanut butter

Relative to disease and injury hazards, the Kennebec Valley Humane Society wishes to inform the volunteer (or parent of the volunteer) of the availability of a preventative rabies vaccine. All volunteers are strongly encouraged to discuss the possibility of receiving a preventative rabies vaccine with their doctor, as the shelter receives many stray animals of unknown temperament and background.

- I have completed this application and answered all information honestly and accurately. I agree to notify KVHS if any of this information changes. I give permission to the Kennebec Valley Humane Society to verify any information given on this volunteer application. I understand that KVHS reserves the right to conduct background checks on any applicant applying for a volunteer position at KVHS.
- I have watched the volunteering overview video and understand that I must follow all safety protocols and direction provided by staff and Volunteer Manager. Failure to do so will result in loss of volunteer status.
- In the event of an emergency, I hereby give permission for KVHS to seek emergency medical care for me.
- I fully understand that volunteers will not be covered under any Workers' Compensation Acts for any volunteer work-related sickness or injury. I also understand that Kennebec Valley Humane Society's insurance does not cover volunteer work-related sickness or injury, and I will be responsible for expenses arriving from volunteer work-related injury or sickness. As a part of this statement, I agree to follow the supervision and instruction of Kennebec Valley Humane Society's Volunteer Coordinator and staff members.
- I understand that volunteers are not to represent Kennebec Valley Humane Society in any official capacity on social media, in print, radio, television, or in public or private appearances without the approval of the Executive Director.
- I understand that volunteer application approval will be based on the current volunteer needs of KVHS.
- I agree to use the scheduling methods provided by KVHS and attend two volunteer shifts a month. Repeated failure to attend will result in loss of volunteer status. I also understand non-attendance for 4 months, without communication with the volunteer manager, will result in loss of volunteer status.
- 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.
- I understand that Kennebec Valley Humane Society often utilizes photos and videos of shelter activities for marketing purposes. I authorize use of photo or video of my volunteering participation to be published.

**PLEASE KEEP A COPY OF THIS COMPLETED APPLICATION FOR YOUR RECORDS**

Date:

Print Name:

\_\_\_\_\_

Signature:

\_\_\_\_\_

Parent/Guardian  
Signature  
(if under 18):

\_\_\_\_\_

Parent/Guardian  
Print Name:

\_\_\_\_\_

DATE CONTACTED:

SCREENING POLICY CHECK:

*KVHS USE ONLY*

ACCEPTED/DENIED:

NOTES:

ORIENTATION DATE: