

North Jersey Community Animal Shelter
23 Brandt Lane Bloomingdale, NJ 07403

VOLUNTEER APPLICATION

Volunteer's Name:

Address:

City: _____ State: _____ Zip _____

Email Address:

Telephone Number: _____ Cell: _____

Hours/Best time to be contacted: _____ Date of
Birth _____

I am currently: Employed Unemployed A Student A Student and Employed

Employer: _____

Occupation: _____

Is it okay to contact you at work? Yes No If yes, what is the best way to contact you?
(Please provide contact
information.) _____

(If applicable) I am a student
at: _____

Grade level: _____ Area of
study _____

_____ I am covered by health insurance with _____

Member ID # _____

_____ I do not have health insurance and understand that expenses from injury will be
paid by me personally and not by the Borough of Bloomingdale or the North
Jersey Community Animal Shelter.

Do you have a valid driver's license? Yes No I'm a minor.

DL#: (state issued _____)

I'm interested in volunteering in the following area(s) (Circle all that apply.)

dogs- cats- foster care dogs- foster care cats- fundraising- special events- adoptions-
general grounds upkeep- other

If you circled other, please briefly
describe _____

Please answer the following questions.

1. I am at least 18 years old: Yes No

2. I am not 18 years old, but I would like to volunteer with NJCAS, and I understand that
a parent or guardian will be required to be with me at all times. Yes No

3. Have you volunteered at a shelter in the past? Yes No

If yes, when and with what organization?

What job(s) did you perform?

4. Have you volunteered anywhere else in the past? Yes No

If yes, when and with what
organization? _____

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5. If you have NOT volunteered/worked at a shelter before, briefly describe any
experience working with
animals. _____

6. Do you have any special skills or trade skills that might be helpful at the shelter?
Carpentry, plumbing, electrical, computer, photography, gardening, baking/cooking
sales or other

If you checked other, please briefly describe.

7. Do you have any pets? Yes No

If yes, what type? _____

8. Are your pets spayed/neutered? Yes No

9. Are your pets vaccinated? Yes No

10. Do you understand that from time to time it is necessary to euthanize a companion animal at the shelter, and you agree not to interfere with the decision to euthanize when it's deemed necessary? Yes No

11. Volunteers are required to wear NJCAS branded shirts during the hours they volunteer. We ask each volunteer to contribute \$20 to help cover the cost of the shirt. Are you okay with this? Yes No

12. I realize that NJCAS's volunteer program requires me to abide by a schedule and be reliable to commit to hours or a shift that is agreed upon. Yes No

13. I realize that NJCAS's volunteer program has guidelines and rules that I will be asked to follow for the safety of myself, others, and the animals. I understand that if I do not follow these regulations, I may be asked to leave the program. (All volunteers will be issued a NJCAS Handbook.) Yes No

14. I understand that NJCAS has a zero-tolerance policy toward drugs, alcohol, and sexual harassment, and that I will be asked to leave the program if I do not follow these rules.
Yes No

15. I understand that NJCAS may require a background check before I am able to begin my service. If necessary, I agree to comply with their request to complete a background check and agree to pay any fees associated with the service.

I do attest to the truthfulness of the submitted responses. I understand that I volunteer at my own risk.

I hereby hold harmless North Jersey Community Animal Shelter (NJCAS), the Executive Director, the Board of Directors, its employees and volunteers from any claims which could in any way be associated with my services with NJCAS, including but not limited to animal bites, accidents, injuries or exposure to parasites or other illnesses.

Volunteer signature

I, _____ have reviewed the
Application of
the potential volunteer and have also spoken with/interviewed the potential volunteer.