

VOLUNTEER APPLICATION

Name			DOB		_SSN	
Address				City/State/Zi	ip	
Email Phone						
Have you ever been -If "Yes" then please			or traffic violation?	(select one) \square Ye	es 🗆 No	
Why are you interest	ted in volunteering w	ith us?				
Do you have any exp	perience with animals	and/or pets?				
Please indicate the ve	olunteer opportunitie					1 1
□ Dog walking	□ Dog bathing □ Dog socializing		☐ Assisting with kennel cleaning / Animal care (dogs)		□ Laundry	□ Dish washing
□ Cat socializing	☐ Assisting with kennel cleaning / Animal care (cats)		□ Photography	□ Events	□ Other:	
Emergency Contact:						
NamePho			ne Relationship			
References – persona	al and/or professional	; please provide two	(2):			
Name/Title			Phone Email			
Name/Title			Phone	hone Email		
that incomplete info service. I understar	ormation may result nd that volunteer se	in the rejection of trvice within the Ca	his application, and	false information i nteer program req	to the best of my known ay result in my dismuires a background minal history.	nissal from volunteer
Signature			Date			

Email your completed application to kengel@calhouncounty.org. Please include a copy of your driver's license with your application.