



SPCA of Central Florida
Your local Humane Society... saving pets since 1937!

VOLUNTEER APPLICATION

(Adults 18 years of age and older)

Revised -10/08

For Office Use Only

DATE REC'D:
CALLED:
ORIENT. EMAIL SENT:
ORIENTATION:
NOTES:

After completing this application, all prospective volunteers must read and sign the attached "Volunteer Agreement and Code of Conduct."

Name: _____ **Date:** _____
Last First MI

Address: _____
Street Apt. #

_____ City State Zip Code County

Phone: Home (____) _____ Work (____) _____ Cell (____) _____

I prefer to be contacted at (check one.) Home Work Cell

E-mail: _____ **Birth date:** _____
Provide your preferred email address and be sure we are in your list of accepted organizations. Month / Day

Employer: _____
Company Name Job Title

Are you at least 18 years old? YES NO



We have several volunteer opportunities to choose from! Please indicate your top three choices by numbering your selections **1 – 3** in order of preference, with number 1 being your first priority. You may refer to the attached "Volunteer Opportunities" for help in making your choice.

- Bark Buddy Foster Care Generations Kitty Cuddler
- Office Wizard Party Animal Pet Food Xpress Pet Visitation Program

Are you interested in volunteering: At the Orlando location: 2727 Conroy Rd
 At the Sanford location: 2800 County Home Rd

Hours of Operation at both shelter locations are:
Monday through Saturday, 10:00am – 5:00pm and
Sunday, 12:00 noon – 4:00pm

Please indicate the **day(s)** and **time(s)** you are available:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

What is your volunteer availability for the SPCA of Central Florida?

Ongoing Temporary (from _____ to _____)

How did you hear about the SPCA of Central Florida? _____

Why would you like to volunteer for the SPCA of Central Florida? _____

Have you ever worked or volunteered with a:

- Veterinary clinic Where & when? _____
- Zoological park Where & when? _____
- Animal shelter Where & when? _____
- Non-profit group Where & when? _____

Please tell us about your volunteer duties at the locations checked above, or about other volunteer experience you may have: _____

Please tell us about other experience you have working with animals: _____

Please list specific skills and attributes you have that will be helpful to you as a volunteer for the SPCA of Central Florida (including foreign language skills): _____

Do you have any allergies to animals or other conditions that might make it difficult to volunteer with animals of all ages, sizes, breeds and energy levels? YES NO

If YES, please provide more detail: _____



Do you have pets at home? YES NO
 Are your pets spayed or neutered? YES NO

Please tell us about your pets! _____

Have you ever turned in a companion animal to a county shelter or other animal rescue organization? YES NO

If YES, please explain the circumstances: _____

The **mission** of the SPCA of Central Florida is **“to promote responsible human behavior toward animals.”** In keeping with our mission, we adhere to a strict policy of spaying or neutering all companion animals.

Will you adhere to and promote this policy? YES NO

What are your thoughts on this policy? _____

The SPCA of Central Florida accepts all animals that are relinquished by any owner who feels they are no longer able to care for them. We do not limit the amount of time an animal remains in our shelter. All animals in good health and of good temperament are placed up for adoption. We do have one of the highest adoption rates in the country, however, there are certain circumstances when an animal must be euthanized. What are your thoughts on this issue? _____

Please provide us with two personal, non-related references:

NAME	HOW DO YOU KNOW THIS PERSON?	DAYTIME PHONE NUMBER	LENGTH OF TIME KNOWN

Emergency Contact Information:

Name: _____ Relationship to you: _____

Address: _____

Phone: Home (____) _____ Work (____) _____ Other (____) _____

VOLUNTEER AGREEMENT and CODE OF CONDUCT

As a volunteer for the SPCA of Central Florida, (hereinafter referred to as SPCA/CFL):

I give my permission to the SPCA/CFL to verify any of the information in this application.

In signing this statement, I agree to abide by the policies and procedures of the SPCA/CFL, during my time as a member of the volunteer staff. I will conform to all rules and regulations commonly applying to employees of the SPCA/CFL, including safety, discrimination, harassment, and confidentiality.

I will confide all comments, questions, suggestions, whether positive or negative, to my immediate staff supervisor and/or the Manager of Volunteer Services.

I give consent to SPCA/CFL to use and reproduce my name, voice, and/or likeness or that of my pet(s) in connection with any advertising, programming, and/or promotion of the SPCA/CFL in any media it chooses.

I agree to hold harmless the SPCA of Central Florida, Inc., its agents, employees, directors and insurance carriers from any and all claims, damages, and judgments which I may have now or in the future against the SPCA of Central Florida, Inc. in all matters pertaining to my service as an SPCA of Central Florida, Inc. volunteer staff member including, but not limited to, personal injury.

I further agree to (please read and check each line to indicate your acceptance):

- Support the mission, goals and efforts of the SPCA of Central Florida with a positive attitude.
- Approach my volunteer job responsibilities with professionalism.
- Treat all animals with kindness.
- Promote goodwill by handling contacts with staff, other volunteers, customers, and visitors in a spirit of courtesy and cooperation. Be positive and creative in my efforts to resolve problems.
- Report to my volunteer job physically and mentally fit for duty. ***The SPCA of Central Florida is a drug free workplace.***
- Provide appropriate notice of unavoidable absence or lateness.
- Deal fairly with all SPCA/CFL colleagues, co-workers, supervisors, customers, visitors, volunteers, etc., without regard to their gender, race, ethnicity, religion, creed, age, sexual orientation, marital status, national origin, ancestry, citizenship, military status, veteran status, handicap or disability.
- Contact the Volunteer Services department immediately if I feel discriminated against or harassed by someone in connection with my volunteering.
- Only serve as an agency representative in the community or media spokesperson when authorized to do so by the Administrative Office or Volunteer Services Department.
- Correct, when possible, misleading or inaccurate information and representations made by others concerning SPCA/CFL policies, practices and procedures.
- Maintain and safeguard the confidentiality of all business, donor, employee, volunteer and animal records, credit and financial information, and/or any information relating to the operation of the agency that is not known or readily accessible to the public.
- Observe all safety and security rules in the performance of my volunteer job duties.
- Report accidents, injuries, fire, theft or other unusual incidents immediately after occurrence or discovery.
- Avoid engaging in any conduct that is or could be perceived as a conflict of interest. Refrain from using SPCA/CFL property, services or supplies for personal reasons unless given prior permission by the appropriate staff member.
- Contact the Volunteer Services Department with any questions or concerns about SPCA/CFL policies, procedures, interpersonal communications, or my volunteer responsibilities.
- Understand and agree that I may need to supply a Florida Department of Law Enforcement background check at my expense.
- In order to remain in good standing, I understand I am required to consistently adhere to the Volunteer Code of Conduct.***

Signature

Date

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