

CONNECT. ADOPT. LOVE.

VOLUNTEER APPLICATION

PLEASE PRINT

Today's Date _____

PERSONAL INFORMATION (15-17 years old, parent or guardian must sign)

Last Name	First Name	What is your age range?	
	Middle Initial	15-17 18-30 31-40 41-50 51-65	
		65+	
SS#	Home Phone	Cell Phone	
xxx – xx			
Address		Apt #	
City	State	Zip	
E-Mail	Driver's License or I.D. #	Date of Birth	

EDUCATION & WORK EXPERIENCE

Current employment status (Circle One)	Circle last year of school completed:		
Employed Full Time Employed PT Homemaker/Unemployed/Retired	High School 9 10 11 12		
Current student? If student, where? College Major	College 1 2 3 4		
Yes / No			
Current / Most recent employer	Graduate School 1 2 3 4		
What is your profession?	Language(s) spoken:		
	English Spanish French Other		

Have you ever been convicted of a felony? Yes \Box No \Box Military background/federal/state employee: If yes, please elaborate (Answering yes does not necessarily preclude volunteer service):

AVAILABILITY

How long of a commitment can you make?	Availability – Please	e check the	boxes for the	e days and ti	mes you are	the most ofte	en available to	o volunteer.
□ 6 Months		S	М	т	W	Th	F	S
□ 9 Months □ 12 Months	First Shift							
	10am – 1pm							
	Second Shift 1pm – 4pm							
	Third shift 4pm – 6pm							
A minimum of 6 months / 17 hours monthly to complete 100	Last Shift Offsite events							

This section for animal shelter use only:

Background Check: Pass Fail	Welcome email sent:
Email Entered: Yes N/A	B/O Schedule date/time:
Minor Yes No Age	Adult Supervisor:

Please check the box next to your area(s) of interest:

- □ Canine/Feline Adoption Counselor help our pets find homes by doing meet and greets with potential adopters.
- □ Kennel Assistant Assist staff with the day-to-day care of our shelter pets. Includes deep and spot cleaning.
- □ Canine/Feline Enrichment help increase adoptability by walking, socializing, playgroups and creating enrichment toys.
- □ Customer Service Greeters Assist customers in Wellness Clinic and Information desk.
- □ Photographer Assistant help increase adoptability by assisting Photographers take pictures.
- □ Bather/Groomers help increase adoptability by bathing, de-ticking pets and assisting groomer.
- $\hfill\square$ Administrative Support provide support to multiple departments.
- $\hfill\square$ Clinic Support Assisting vet techs and clinical staff with day-to-day operation.
- □ Events Assist Adoption Counselors and Event Coordinator in shelter and off-site events.
- □ Volunteer Assistant Assist Special Needs Volunteers with different tasks/assignments.

Do you have any particular skills or interests that you think could help in a unique way?

Do you have any physical limitations that may require accommodation or restrict your volunteer experience? Please explain.

VOLUNTEER EXPERIENCE / MOTIVATION

What animals do you currently care for?	
List and describe any previous volunteer experience you have:	Please indicate the reason you are seeking a volunteer position:
	Personal fulfillment
	□ To meet new people
	Family / Friends already involved
	Requirement
List any skills, interests, hobbies or experiences you have had with pets:	Professional Development
	Extra Time
	□ Other

Please tell us how you found out about volunteering with Miami Dade Animal Services: □ Newspaper □ Website □ Television □ Friends □ Other: ______

EMERGENCY CONTACT INFORMATION

Contact Name:	Relationship to volunteer:
Home Phone:	Cell Phone:



VOLUNTEER AGREEMENT

- I will abide by the policies and procedures set by Miami-Dade Animal Services and will treat animals respectfully and with care.
- I agree to the minimum commitment requirement set by Miami-Dade Animal Services and understand that if I am unable meet the requirement, I will forfeit the accumulated hours.
- I understand that Animal Services is an open admission facility and though the attempt is made to save as many animals as possible, euthanasia is at times medically indicated to alleviate pain and suffering as determined by a veterinarian.
- I will speak in a positive manner regarding Animal Services at all times and be polite and professional to all staff, other volunteers and the public at all times.
- I understand that engaging in malicious activities that may damage the reputation of the Department, its rescue partners, employees or other volunteer is counterproductive to the parties' mutual mission of promoting adoptions of stray animals and the reduction of the stray population in Miami-Dade County. Accordingly, such actions may result in termination of this Agreement by the County.
- Because my safety is paramount, safety protocols must be adhered to at all times and at all levels; thus, I must have the ability to follow and execute written and verbal instructions from designated immediate supervisors and chain of command.
- I understand that the application or administration of any prescription or over the counter medication whether orally, topically, by injection or any other parenteral route is strictly prohibited. This includes food but is not limited to any and all pills, capsules, tablets, creams, ointments and liquids.
- I will wear my uniform, which includes jeans, sneakers, my volunteer shirt and badge. In addition, I will do the job I am assigned to and stay in the area assigned. I will also limit my phone usage while volunteering and use it in the front or sides of building as courtesy to the customers.
- I will only speak to the Volunteer Coordinator or a supervisor, regarding any problem with an animal, staff of the public.
- I agree to respect the confidential nature of the information I may obtain. I understand that my failure to follow the policies and rules of the Animal Services Department will result in the termination of my service with the Department.
- I understand that if I am in violation of Chapter 5 of Miami-Dade County code and/or the Volunteer Code of Ethics that my volunteer status may automatically terminated.

Signature: _____

Print Name:	Date:
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VOLUNTEER WAIVER

- 1. I, ______agree to release, discharge, indemnify, and hold harmless Miami-Dade Animal Services for any and all damage to my personal property while performing my volunteer services at Animal Services in a volunteer capacity.
- 2. I recognize that in handling animals at Animal Services while performing my volunteer services, there exists a risk of injury, including personal physical harm. On behalf of myself, my heirs, my personal representatives and executors, I hereby release, discharge, indemnify and hold harmless Miami-Dade Animal Services, its agents, servants and employees from any and all claims, causes of action or demands, of any nature or cause connected with my Volunteer Agreement. This might include costs and attorney's fees and court costs incurred by Animal Services in connection with my volunteer services based on damages or injuries which might be incurred or sustained but are not limited to animal bites, accidents, injuries and personal property damage.
- 3. I understand that public relations are an important part of volunteering at Animal Services. I therefore agree on behalf of myself, my heirs, my personal representatives and my executors, to allow Animal Services to use any photographs taken of me for use in public relations efforts. Animal Services will use reasonable efforts to notify me before use, but such notification is not a condition of photographs being released for public relations purposes.
- 4. I acknowledge that I have read and fully understand the terms and conditions of the foregoing volunteer agreement and release and that I will comply with same.

Volunteer Signature

Animal Services Representative

Date

PERMISSION FOR THOSE UNDER 18 YEARS OF AGE TO VOLUNTEER

- 1. As a parent or legal guardian of the above-mentioned volunteer, I hereby give my consent to allow my child/ward to volunteer independently (16 -17 years old) for Miami-Dade Animal Services as described within this Volunteer Agreement and Release and understand that I must attend the volunteer orientation.
- As a parent or legal guardian of the above-mentioned volunteer, I hereby give my consent to allow my child/ward to volunteer for Miami-Dade Animal Services as described within this Volunteer Agreement and understand that I must volunteer with above-mentioned volunteer (15 years old) at all times. Additionally, I understand that I will do the mandatory background check along with my child/ward.
- 3. I have read this Volunteer Agreement and Release and fully understand its terms and conditions. On behalf of my child/ward and myself, I agree to all terms and conditions as set out in the Volunteer Agreement and Release.



SPECIAL NEEDS VOLUNTEERS

Volunteers of all abilities are welcome at Miami-Dade County Animal Services Department. We provide various opportunities at differing skill levels to ensure all volunteers are engaged. Such opportunities include, but are not limited to, administrative support, adoption counselor, bather/groomer, canine/feline enrichment, clinic support, customer service greeter, and kennel assistant. Most volunteer activities that involve direct animal contact require bending, stooping, and the ability to lift 50 pounds.

As such, volunteers working independently and in direct contact with our animals must successfully complete volunteering requirements, i.e., orientation and training and receive a positive recommendation concerning their ability to work with animals. Additionally, because there is no way to predict, with certainty, how an animal will behave or interact with volunteers, for the safety of all volunteers, staff, and the animals under our care, volunteers must be able to monitor visual and auditory cues which may indicate that an animal may pose a danger.

Volunteers who do not meet the criteria for independent volunteering are still permitted to work directly with our animals. However, they must be accompanied by a personal assistant, an adult family member, friend, or professional aide, who has successfully completed the volunteering requirements and is capable of assisting the volunteer.