



**SPCA OF TENNESSEE**  
PO Box 1014  
Brentwood, Tennessee 37024-1014  
(615) 354-3531  
spcaoftn@gmail.com  
SPCATN.ORG

## Volunteer Application

Please answer all questions truthfully and to the best of your knowledge. If information is received at any time from any source that proves false information was provided, even after approval is given by our SPCA representative, we have the right to terminate your volunteer rights. Any actions/conduct we deem as inappropriate will result in immediate termination of your volunteer rights and will be at the discretion of the TN SPCA President.

Date \_\_\_\_\_

Name \_\_\_\_\_

EMAIL \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

How long have you lived at the address you listed? \_\_\_\_\_

Are you over 18? \_\_\_\_\_ Teen Volunteer 16-18? \_\_\_\_\_

Have you ever been convicted in any state for any felony related to any type of animal species? \_\_\_\_\_ If so, please explain: \_\_\_\_\_

\_\_\_\_\_

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What experience or skills do you have that you can share with the TN SPCA?

\_\_\_ Public Speaking \_\_\_ Writing \_\_\_ Animal Training

\_\_\_ Special Events \_\_\_ Data Entry \_\_\_ Fund Raising

What type of work would you be interested in doing with the TN SPCA?

\_\_\_ Animal Grooming \_\_\_ Dog Socializing \_\_\_ Cat Socializing  
\_\_\_ Dog Behavioral Training \_\_\_ Cattery Assistant  
\_\_\_ Dog Kennel Assistant \_\_\_ Fund Raising & Special Events

How would you like your volunteer experience to benefit you?

\_\_\_ Work experience \_\_\_ Use of talents and abilities \_\_\_ To work with animals  
\_\_\_ Increase knowledge of animals \_\_\_ Meet new people \_\_\_ Community Support \_\_\_  
Personal satisfaction \_\_\_ Other

How many days \_\_\_ and/or hours \_\_\_ per week would you be willing to volunteer?

\_\_\_ Day \_\_\_ Evenings \_\_\_ Weekends

Previous volunteer workplace \_\_\_\_\_  
\_\_\_\_\_

Reference Name \_\_\_\_\_ How can we contact them?

\_\_\_\_\_ Relationship to reference \_\_\_\_\_

In case of emergency, notify: \_\_\_\_\_

Is there any additional information you wish for Tennessee SPCA to know? \_\_\_\_\_  
\_\_\_\_\_  
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RELEASE: I release the Tennessee SPCA from any responsibility or liability due to injury while working as a TNSPCA Volunteer.

\_\_\_\_\_ Date \_\_\_\_\_

APPROVAL:

\_\_\_\_\_ Date

\_\_\_\_\_  
SPCA Representative