

SPCA of Tennessee Volunteer Application



PO Box 1014
Brentwood, TN 37024-1014

SPCATN.ORG

(615) 354-3531
spcaoftn@gmail.com



Applicant Information:

LAST NAME:

FIRST NAME:

STREET ADDRESS:

CITY:

STATE:

ZIP CODE:

HOME PHONE:

CELL PHONE:

WORK PHONE:

Date:

Additional Information:

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 SPCA of Tennessee president.

How long have you lived at the address you listed?

Are you over 18?

YES NO

Teen Volunteer?

YES NO

Have you ever been convicted of a felony related to any type of animal species in any state?

YES NO

If yes, please explain:

What experience or skills do you have that you can share with **SPCA of Tennessee**?

(select all that apply)

Public Speaking	Writing	Animal Training	Special Events
Data Entry	Fund Raising	Other	

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

(select all that apply)

Animal Grooming	Dog Socializing	Cat Socializing
Dog Behavioral Training	Cattery Assistant	Dog Kennel Assistant
Fund Raising	Special Events	Other

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? (please specify)

Weekdays:

Monday	Tuesday	Wednesday
# of hours:	# of hours:	# of hours:

Thursday	Friday
# of hours:	# of hours:

Weekends:

Saturday
of Hours

Sunday
of hours

Previous volunteer workplace?

YES NO

If yes, please list name:

Is there any additional information you wish SPCA of Tennessee to know?



References (please list at least one):

Reference 1:

Phone Number:

Relationship to reference:

Reference 2:

Phone Number:

Relationship to reference:

Reference 3:

Phone Number:

Relationship to reference:

In Case of Emergency:

In case of emergency, notify:

Phone Number:

RELEASE: I release the **SPCA of Tennessee** from any responsibility or liability due to injury while working as an **SPCA of Tennessee** volunteer.

(Volunteer's name)

(Signature)

(Date)

(SPCA of Tennessee Representative)

(Signature)

(Date)

*Thank you for considering volunteering at **SPCA of Tennessee**. We are a non-profit organization committed to helping our furry friends rehabilitate and find their forever homes. It is people like you who help us every day with our mission! Please visit SPCAOFTN.ORG for more information.*

Staff only:

Staff member processing the application:

This application is:

Approved Declined

If declined, why?