

Volunteer Application

Please fill this application completely and to the best of your ability.

то образования в предоставляющих предоставляющ		
Name *		
First Name Last	: Name	
Address *		
Street Address		
Street Address Line 2		
City	State / Province	
Postal / Zip Code		
Phone Number -	Primary *	
Area Code	Phone Number	
Phone Number - Secondary		
Area Code	Phone Number	
Email *		
example@example.com	n	

Occupation *

Emergency Contact Name *

First Name

Last Name

Phone Number - Primary *

Area Code

Phone Number

Relationship to Volunteer *

Please select the volunteer opportunities that you are the most interested in.

(Select all that apply)

Volunteer Opportunities *

Community Outreach

Dog Walking

Fundraising

Special Events

Professional Photography/Videography

Training

Street Team/Marketing

Transporter/Driver

Transporting Animals

Occasionally we need help transporting animals or donations to a variety of locations. Are you willing to help transport animals or donations in your own vehicle? *

Yes

No

Do you have a valid driver's license and access to a vehicle? *

Yes

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Is the vehicle covered by liability insurance? *
Yes
No
Excluding traffic violations, have you ever been convicted of any criminal offense? *
Yes
No
If yes, please explain:
How did you hear about Pawsitive Possibilities Rescue, Inc.'s volunteer program, and what made you interested in volunteering for us? *
you interested in volunteering for us.
What special skills, training, or hobbies do you have to offer as a volunteer for Pawsitive
Possibilities Rescue, Inc. *
Are you fluent in a second language? If so, what language(s)? *
When are you most likely to come and volunteer? *

I confirm that all of the information provided on this application is true and correct.