

BACK TO THE WILD APPLICATION FOR VOLUNTEERS

PART I: PERSONAL INFORMATION

FIRST NAME:

MIDDLE INITIAL:

LAST NAME:

STREET ADDRESS:

CITY, STATE:

ZIP CODE:

HOME PHONE:

CELL PHONE:

WORK PHONE:

EMAIL ADDRESS:

ARE YOU CURRENTLY EMPLOYED?

ARE YOU AT LEAST 16 YEARS OF AGE? (MUST BE 16 OR OLDER TO VOLUNTEER AND 18 OR OLDER TO WORK WITH ADULT ANIMALS):

HOW DO YOU FEEL ABOUT EUTHANASIA?

DO YOU HAVE ANY PHYSICAL LIMITATIONS OR ALLERGIES WE SHOULD KNOW ABOUT?

ARE YOU UP TO DATE ON YOUR TETANUS VACCINATION?:

ARE YOU UP TO DATE ON YOUR PRE-EXPOSURE RABIES VACCINATION?:

PLEASE LIST HOURS OF AVAILABILITY BELOW:

DAY OF THE WEEK	TIMES AVAILABLE
MONDAY	
TUESDAY	
WEDNESDAY	
THURSDAY	
FRIDAY	

SATURDAY	
SUNDAY	

PART II: PREVIOUS EXPERIENCE

COMPANY NAME	DATE STARTED AND ENDED	JOB POSITION/TITLE

Notes, tasks performed, reason for leaving

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Notes, tasks performed, reason for leaving

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Notes, tasks performed, reason for leaving

PLEASE LIST ANY OTHER PERTINENT EXPERIENCE AS WELL AS SKILLS YOU THINK WOULD BENEFIT BACK TO THE WILD AND AID YOU IN YOUR WORK:
