

**P.O. Box 1232, Leonardtown, MD 20650**

[www.smawl.org](http://www.smawl.org) **301-373-5659**

**VOLUNTEER APPLICATION AND AGREEMENT**

The St. Mary’s Animal Welfare League is a group of individuals who work to find loving homes for the homeless cats and dogs of St. Mary’s County. SMAWL is always seeking volunteers who love animals.

\***Note**\* Volunteers seeking to work at our PETCO locations must be a minimum of **18** years of age or older.

Please take the time to complete this application and return it to the above address. After reviewing the information you provide, one of the SMAWL’s Volunteer Coordinators will contact you regarding your time availability and the volunteer activities in which you have expressed an interest.

**Personal Information:**

|  |  |  |
| --- | --- | --- |
| **First Name:** | **Last Name:** | **Birth Date** (Month/ Year):  |
| **Street Address –or- P.O. Box#:** | **City, State, Zip Code:** |
| **Home Phone #:** | **Work Phone #:** |
| **Cell Phone #:** | **Best time to call:** |
| **E-Mail Address:** |
| **Do you have daily access to your e-mail?**  **[ ] Yes** **[ ]  No**  | **If no, how often can you check e-mail?**  |
| **Employer:** | **Phone #:** |

**Current Pets:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Sex** | **Age** | **Breed** | **Spayed/Neutered** |
|   | [ ] Male [ ] Female |   |   | [ ] Yes [ ] No |
|   | [ ] Male [ ] Female |   |   | [ ] Yes [ ] No |
|   | [ ] Male [ ] Female |   |   | [ ] Yes [ ] No |
|   | [ ] Male [ ] Female |   |   | [ ] Yes [ ] No |
|   | [ ] Male [ ] Female |   |   | [ ] Yes [ ] No |
| Where do your current pets stay while unattended? [ ] **In house, crated/confined** **[ ] Garage** **[ ] In house, free roam of the house** **[ ]  Basement** **[ ] Outdoors**  |
| **Volunteer Applicant Information:** |
| Please describe why you are interested in volunteering for a group dedicated to rescuing homeless dogs and cats? |
| Do you have any experience, past or present, working with animal rescues: [ ]  **Yes**  [ ]  **No**If yes, which organization: |
| Please check the volunteer activities in which you would like to participate: [ ] **Transport**  [ ]  **Kennel Visitors** [ ] **Foster Care** [ ] **Publicity** [ ] **Fundraising**  [ ] **Humane Education** [ ] **Foster Care Recruiting** [ ] **Adoption Events** [ ] **Home Visits** [ ] **Grant Writing** [ ] **Maintenance Volunteers** [ ] **Clerical**  [ ] **Cat Care** [ ] **Membership**  [ ] **PETCO Cat Volunteer** [ ] **Animal Fair Team** [ ] **Volunteer Recruitment and Training**  [ ] **Other:**  |
| Approximately how many hours per week do you have available for volunteer activities?Are you available: [ ] **Weekdays**  [ ] **Weekday Evenings** [ ] **Weekends**  [ ] **Varies** |
| Do you have any experience/training in any of the following dog-related areas? Check any/all that apply.[ ] **Dog Breeding** [ ] **Dog Training** [ ] **Dog Grooming** [ ]  **Veterinary Assistant** [ ] **Kennel Assistant** **[ ] Other:**If you have checked any of the above, please describe the nature & extent of your experience:  |
| Are you willing to transport pets in your personal vehicle? [ ]  **Yes**  [ ]  **No**If yes, are you willing to accept any risk involved in transporting a dog inside of your vehicle?  [ ]  **Yes** [ ]  **No**What type of vehicle do you have for transporting dogs? |

**IF INTERESTED IN PROVIDING A FOSTER HOME FOR AN ANIMAL,**

**PLEASE COMPLETE PAGES 3 & 4.**

**OTHERWISE, SKIP TO THE VOLUNTEER AGREEMENT ON PAGE 5.**

**Foster Family Application**

**Applicant’s Name:**  **Phone Number:**

I am interested in fostering: (*Check all which apply)*

**[ ]  Cat** **[ ]  Kitten** **[ ] Large Dog**  **[ ] Med. Dog (21-50 lb.)**  **[ ]  Small Dog (<20 lb.)**  **[ ] Puppy**

**Residence Information:**

|  |  |
| --- | --- |
| **[ ] House** **[ ] Condo** **[ ] Apartment** **[ ] Mobile Home** **[ ] Townhouse** | Do you? [ ]  **Own** **[ ] Rent** |
| Do you have a pool? **[ ] Yes [ ] No**If yes, is the pool secured? **[ ] Yes [ ]  No**  | Is your yard fenced? **[ ]  Yes** **[ ]  No**If yes, what type of fence? [ ] **Chain Link** [ ] **Privacy**  [ ] **Invisible** [ ] **Other Fence** : **Height      Feet** |
|  |
| If you do not have a fenced yard, please describe how you will safely handle exercise and potty breaks:

|  |
| --- |
| Have you ever had any complaints from others about your pets? **[ ]  Yes** **[ ] No**If yes, please explain: |

 |
| Do you have an outside dog run or kennel? **[ ]  Yes [ ]  No**If yes, is there access to the house or garage? **[ ]  Yes [ ]  No** If no, what shelter is available?  | Are there any outside distractions (check all that apply)?**[ ] Neighbor dogs or cats** **[ ] Loose dogs or cats** **[ ] Children** **[ ]  Busy Street** |
| Do children or strangers have access to your yard? **[ ]  Yes [ ]  No** | Have you checked your home/yard for dangerous objects, plants, or chemicals? **[ ]  Yes [ ]  No** |
| Are you willing to make improvements to your home or yard in order to provide a safe and secure environment for your foster animal? **[ ]  Yes [ ]  No** |
| How many hours per day will the animal be unattended?   [ ] **0-4 hours [ ] 4-8 hours [ ] 8-12 hours [ ] More than 12 hours** |
| If a dog will be unattended for extended periods of time, do you have arrangements in place to allow the dog out? **[ ] Yes [ ] No**If yes, please describe arrangements: |
| **Your Veterinarian Name**:**Phone Number:**  |
| Where will the dog be kept while unattended**? [ ] Crated, inside house [ ] Garage****[ ] Uncrated, free roam of house [ ] Basement [ ] Outdoor kennel run** **[ ] Tied out in yard [ ]  Loose, outdoors [ ]  Other:** |
| Where will the dog be kept when people are home? [ ]  **Inside [ ]  Outside** |
| Where will the dog sleep at night? [ ]  **Crated, inside house [ ]  Uncrated, free roam of house** **[ ]  Basement [ ]  Garage [ ]  Outdoor kennel run [ ]  Tied out in yard** **[ ] Loose, outdoors [ ]  Other:** |
| Have you considered how to prevent or correct behavior problems such as Barking, Housebreaking, Scratching furniture, Chewing, Digging, or Aggression? **[ ]  Yes [ ]  No** Please explain how you would deal with these types of behavior:  |
| It may take your foster animal a month or longer to adjust to its new home. During that adjustment period, some undesirable behaviors may emerge such as, housebreaking issues, intestinal distress, pacing, etc. Are you prepared and willing to work through the adjustment period with a foster animal?  **[ ]  Yes [ ]  No** If no, why not? |
| Some foster dogs may benefit from obedience training. Would you be willing to attend training with the dog?   **[ ] Yes [ ] No** |
| If you have cats: Are they: [ ]  **Indoor**  [ ]  **Outdoor** [ ]  **Both** Tested for: [ ]  **FLK**  [ ]  **FIV**   |
| Are your pets accustomed to being introduced to other animals? [ ]  **Yes**  [ ]  **No**If no, explain: |
| Do you have a large crate or does your home have an outside kennel for the temporary confinement of dogs?  [ ] **Crate** [ ]  **Kennel**  [ ] **Both** [ ] **Neither**   |

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| --- |
|  |

**Family/Household Information: Please list all household members not listed above.**

|  |  |  |  |
| --- | --- | --- | --- |
| **First Name** | **Last Name** | **Month/Year of Birth** | **Relationship** |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
| Have you discussed what impact your volunteer activities could have on your family life (i.e. Fostering an animal, time away from family, etc): **[ ] Yes** **[ ]  No**  |

**Volunteers will be required to complete a Liability Release Form upon acceptance as a Volunteer with the St. Mary’s Animal Welfare League.**

I, , hereby agree to abide by the following terms during the time I am a volunteer for the St. Mary’s Animal Welfare League:

1. I will treat all SMAWL animals in a responsible and humane manner.

2. I will remember in all my dealings with the public that I represent SMAWL.

3. I agree that any animal in my care, whether through foster home or other volunteer activities, remains the possession and property of SMAWL until that animal is placed in a permanent home.

I accept full responsibility for any and all expenses incurred during my tenure as a volunteer and representative for the St. Mary’s Animal Welfare League, except for those pre-approved by a SMAWL Board Member. In the event I resign as a volunteer, I hereby agree to return any foster animals in my possession and all SMAWL records and/or SMAWL property to SMAWL within ten days of resignation.

**AGREED TO BY VOLUNTEER APPLICANT:**

**Name:       Date:**

**(If completing electronically, your typed name will represent a signed “hard copy” signature)**

Email application to: **smawl@yahoo.com**

 -OR-

Land mail application to:

**SMAWL**

**P.O. Box 1232**

**Leonardtown, MD 20650**

**Revised 03/2011**