

How did you hear about our organization? _____

Why do you want to be a Volunteer? _____

Do you have any physical limitations that need to be considered for job assignment purposes? If so, please explain: _____

Have you ever been convicted of a criminal offense other than a traffic offense? ____Yes ____No

If yes, please explain: _____

References: (Non-relative; known at least one year; references from a veterinarian or other animal care professional are especially helpful.)

1. _____
Name Address City/St/Zip
How many years known? _____
Phone No.

2. _____
Name Address City/St/Zip
How many years known? _____
Phone No.

Interest in what type of Volunteer Opportunities: (check all that apply)

Clerical Duties Answering Phones Adoption support
 Grooming Computer Data Entry
 Cleaning Facilities Assisting with animal care Other

Do you have a valid North Carolina Driver's License? If so, list Number _____

Certification

I certify the information given in this application is complete and correct. I further understand that discovering information to the contrary may be cause for re-determination of volunteer assignments with the agency.

I certify that I am covered by an independent insurance carrier and that the County of Franklin will not be held responsible for any injuries that I may incur as a result of my Volunteer services for the County.

Signature: _____ Date: _____
