

**JESSAMINE COUNTY ANIMAL SHELTER (JCAS) VOLUNTEER APPLICATION**

400-½ Park Drive, Nicholasville, Kentucky 40356

Phone (859) 881-0821

Name \_\_\_\_\_ Date \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Second Phone: \_\_\_\_\_

E-mail Address \_\_\_\_\_ Best Method to Contact You: \_\_\_\_\_

Employer: \_\_\_\_\_ May we call you at work? \_\_\_\_\_

If under 18,

Parent's Name: \_\_\_\_\_ Parent's Address: \_\_\_\_\_

**Junior Volunteer Requirements**

JCAS Volunteers must be at least 12 years old. Junior Volunteers are defined as volunteers who are between the ages of 12 and 16. Junior Volunteers must be accompanied by a parent or adult guardian until they have demonstrated that their maturity and skills are at the level where supervision by a parent or adult guardian is no longer necessary. This will be determined by a JCAS staff member. All junior volunteers must demonstrate the ability to act responsibly and to follow rules and guidelines. After demonstrating maturity, volunteers under the age of 16 may be under the direct supervision of a parent, adult guardian, designated JCAS volunteer, or JCAS staff member.

I agree to provide adult supervision as outlined in the junior volunteer requirements above.

Parent/Guardian Signature: \_\_\_\_\_

Signature of parent/guardian **required** if volunteer is less than **18** years of age.

Please check the volunteer areas that most interest you:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Office         | <input type="checkbox"/> Adoption Events | <input type="checkbox"/> Walk the Dogs       |
| <input type="checkbox"/> Socialize Pets | <input type="checkbox"/> Train Pets      | <input type="checkbox"/> Fundraising         |
| <input type="checkbox"/> Foster Dog(s)  | <input type="checkbox"/> Foster Cat(s)   | <input type="checkbox"/> Shelter Maintenance |
| <input type="checkbox"/> Teaching       | <input type="checkbox"/> Special Events  | <input type="checkbox"/> Other               |

Why do you wish to volunteer for the Jessamine County Animal Shelter?

Have you ever volunteered at any other organization? If so, where? What did you do? Explain:

What skills/talent/hobbies/training do you have?:

- |                                   |                                       |  |
|-----------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Type     | <input type="checkbox"/> Art Work     | <input type="checkbox"/> Walk the Dogs |
| <input type="checkbox"/> Computer | <input type="checkbox"/> Posters      | <input type="checkbox"/> Fundraising   |
| <input type="checkbox"/> Teaching | <input type="checkbox"/> Dog Training | <input type="checkbox"/> Other         |

KY Driver's License Number: \_\_\_\_\_

Do you have pets? What kind?

**TIME PREFERENCES:**

Except for special events, volunteers work when the shelter is open. What time(s) would you be available?

	Monday	Tuesday	Thursday	Friday	Saturday
noon					
1:00 pm					
2:00 pm					
3:00 pm					
4:00 pm					
5:00 pm					
6:00 pm					
7:00 pm					

Shelter Hours are: Monday, Tuesday, Thursday, and Saturday: noon – 6:00 pm  
Friday: noon – 8:00 pm

**MEDICAL:**

Is there any physical or mental reason that might hinder you from participating in this program? Explain?

**EMERGENCY NOTIFICATION:** (Person to call in case of emergency)

Name: \_\_\_\_\_ Home Phone \_\_\_\_\_

Work Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

**RELEASE OF LIABILITY**

I, the undersigned, in exchange for my being permitted to work as an Animal Shelter Volunteer, hereby agree to release the Jessamine County Animal Shelter and hold it harmless for any and all liability for any injury or damage I may receive while volunteering as and Animal Shelter Volunteer. I, further hereby acknowledge that as a volunteer, I may not be eligible for Worker’s Compensation and agree to hold the Jessamine County Animal Shelter harmless for same.

\_\_\_\_\_  
Signature (parent /guardian if less than 18)

\_\_\_\_\_  
Date

**CERTIFICATION:**

I certify that the above information is correct and complete to the best of my knowledge and belief. I understand that misrepresentation, falsification, or omission of material may be cause for rejection of my application or for my termination after selection into the Volunteer Program at the Jessamine County Animal Shelter. I understand and agree that statements made in this application may be subject to verification concerning same and I hereby release any such person from any and all liability for any damage whatsoever incurred in furnishing such information. Furthermore, I authorize the Jessamine County Fiscal Court to make all necessary and appropriate investigations or backgrounds checks to verify the information contained herein.

\_\_\_\_\_  
Signature (parent /guardian if less than 18)

\_\_\_\_\_  
Date

**PHOTO RELEASE**

\_\_\_ I DO \_\_\_ I DO NOT consent to and authorize the use and reproduction by JCAS of any and all photographs and any other audio-visual materials taken of me for promotional material, educational activities, exhibits, electronic publications or for any other use for the benefit of JCAS.

\_\_\_\_\_  
Signature (parent /guardian if less than 18)

\_\_\_\_\_  
Date