For Office Use Onl	у			
Date Contacted:	By:	Database Entry:	By:	
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Pendleton Animal Welfare Shelter

517 SE 3rd Street; Pendleton, OR 97801

(541) 276-0181

Volunteer Application

Today'	s Date:						
Name:				Aı	re you over th	e age of 10	5? YES NO
Addres	s:						
City:			State	:	Zip:		
Primary	y Phone Nui	mber:					
How w	ould you pr	efer to be cor	ntacted? Ph	noneEmail			
				y other animal sl What were			
Why ar	e you intere	ested in beco	ming a volur	nteer at PAWS?			
List any	profession	al skills or cap	oabilities rela	ated or not to ar	nimals that ma	ay benefit I	PAWS:
Please	indicate t	the general	hours and	days you are	able to volu	nteer:	
	Sunday	Monday		Wednesday			Saturday
From							

Volunteer Roles Available (Please indicate your areas of interest): Thrift Store: Sort items to be sold and general cleaning. Open Tuesday - Saturday 10am-3pm. Fundraising and special events (Typically on weekends or during Round-Up week) ____Driving animals to/from clinics or transporting for special cases. ___Can room: filling bottle drop bags, apply sticker, move to storage shed. Fostering animals in your home. Please specify: Cat(s) and/or Dog(s) DOGS: Cleaning Kennels, feces and urine, give baths/grooming, walk/play/exercise the dogs, sanitizing leashes/collars/carriers/etc. Exceptions or comments: CATS: Clean cat cages, socialize, and pet cats. Exceptions or comments: Specialty Assistance: Provide assistance with training possibly aggressive animals Provide assistance with training shy, non-socialized, or scared animals Shelter Cleaning: Laundry, washing dishes, sweeping, mopping Exceptions or comments: Shelter Maintenance: General shelter & grounds maintenance, yard work, heavy lifting Specialized Skills: Office: Data Entry, Administrative tasks, Answering Phones/Reception, Scheduling Spay/Neuter Clinic clients. Exceptions or comments:_ Have you ever been convicted of a misdemeanor or felony crime? Including, but not limited to: Property crimes, Drugs, Identity Theft, Domestic Violence, or Child/Animal Abuse or Neglect? ______ If yes, please explain: ______

I acknowledge this is not a paying position and do not expect compensation. All information on this application is true and correct to the best of my knowledge. I understand that false or misleading information may disqualify me as a volunteer.

I hereby give my permission for a background o	check(Initials) Date of Bii	rth:/
(Date)	(Volunteer Signature)	
I hereby give my permission for my child Children under the age of 16 MUST be supervis	DOB:sed by a parent or designated	to volunteer at PAWS. d adult.

(Deposit on supplier signature if under 10)