Volunteer Application Unconditional Love Foundation

Please complete this application so that we can discover more about you, your interests, your skills, and your intentions in volunteering with us.

Name:											
Street Address:						City:			State:	Zip:	
Home Phone:					E-mai	_ E-mail:					
Work Phone:					Fax:	Fax:					
Cell Phone:					Other:	Other:					
Emergency Contact Name:								_ Phone			
How did you	ı hear abou	ut us?									
Why do you	want to ve	olunteer w	vith ULF	?							
Have you ev	er volunte	ered for a	nother a	nimal rela	ted organi	zation	? Yes _	No	If yes, which one &	in what capacity?	
Are you volu	unteering t	o fulfill a	commur	nity servic	e commit	ment?					
How many h	nours per v	veek will	you volu	nteer?							
Please list th	e times the	at you wil	l be avai	lable to v	olunteer?						
		Mon	Tue	Wed	Thur	Fri	Sat	Sun			
	A.M.								-		
	P.M.								-		
Do you have	e previous	experienc	e workir	ng with an	imals? Ye	es	No	Pleas	se explain		
Have you ev	er adopted	l a pet? Y	es N	lo							
Have you ev	er given a	pet up? Y	es	No	Please exp	plain _					
What skills,	training, o	r knowled	lge do yo	ou have th	nat will ass	sist in v	volunte	ering? _			

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Please check the kind of volunteer work you we	build be willing to do to	o benefit ULF:
Socialization	_ Dog Walker	Home Visits
Adoption Events	_ Special Events	Fundraising
Humane Education	_ Grant writing	Newsletter
Writing Articles	_Internet Research	Clerical/Data Entry
Marketing/Publicity/Advertising	Get donatio	ons of collars, leads, food, etc
Find Sponsors	_ Recruiting New Vol	lunteersTransportation
Fostering a dog in your home		
Other interests:		
	Transportation	 1:
How far are you able to transport?	-	
Do you have a crate or do you need ULF to pro	vide one?	
When are you available for transports?		
	Foster:	
Do you have other pets in your home?		
Are they Spayed/Neutered? Yes No	If no, why r	not?
Are they current on vaccinations? Yes	No	
Do they get along with other dogs? Yes	No	
Is anyone in your household allergic to animals	? Yes No)
Can you separate the rescues from your own an	imals? Yes	No Please explain
Do you have a fenced in yard? Yes	_ No	
Do you have experience introducing unfamiliar	dogs to each other?	Yes No
Are you familiar with positive obedience training	ng techniques? Yes	No
How long are you willing to foster? Emergency	y Overnight	Short term
Until Adopted Other		
Ve	olunteer Waiver (All N	Must Sign)
abide by the policies and procedures as explained consent to provide my name, voice, photograph	ed to me by ULF durir a, film and likeness of a ities for the ULF, Inc.	If asked to take a photo for ULF I understand ULF
Name:		Today's Date:
Parenta	l Permission (If under	r 18 years of age)
This form is required for any person under the a	age of 18 in order to be	e considered as a volunteer with ULF.

_____, agree to all ______ PRINT NAME OF PARENT OR GUARDIAN PRINT I, ___ PRINT NAME OF MINOR

To participate in the ULF Teen Volunteer Program, I have read and understood all the volunteer information provided. I will be responsible for the transportation of my teen to and from volunteer jobs and events.