Rusty's Angels Sanctuary is a nonprofit organization dedicated to providing a safe and caring environment for senior and special needs canines. Through rescue, foster, adoption, education and hospice; we create secure nurturing homes for them to live out their twilight years.



VOLUNTEER APPLICATION

Rusty's Angels Sanctuary

Founding President: Emilee Spear rustysangelssanctuary@gmail.com

New River, Az 85087

Phone: 480-250-0251 Fax: 623-742-7118

www.rustysangelssanctuary.org

***Only fully completed applications will be considered.

Full Name:			Date:		
Address:			Apt #: City:		
State:	Zip:	Email:_			
Date of Birth	:	Note: You mu	st be 16 yrs+ to volunteer in the shelter independently.		
Home Phone:			Cell Phone:		
Occupation:			Employer:		
Employer's Phone:			Highest Level of Education Completed:		
Emergency C	Contact Full Nam	ne:			
Emergency C	Contact Phone N	umber:	Relationship:		
Why are you	interested in vo	plunteering at RAS?			
east 6 mont Pleas — Thes	hs. Short-term see check one of am interested se hours will be see	volunteering is accep the following: in animal handling a scheduled. in helping RAS as a s	applicant to donate at least 8 hours per month for at sted, but in areas outside of animal handling. Ind can volunteer ≥ 8 hours per month for ≥ 6 months. hort-term volunteer, but understand I will not have		
			animals. Include any experience handling larger dogs.		



Please list any special skills that you think may be useful to volunteering here.
How did you first hear about RAS?
Have you ever volunteered or worked for RAS in the past? If yes, what tasks did you perform? If yes, why did you leave?
Are you presently volunteering, or have you previously volunteered, for any community or charitable organization? If so, which organizations, and what were your tasks?
Are you volunteering to complete: Court-ordered community service? Yes/No Graduation requirement or school project? Yes/No Internship? Yes/No If yes to any, please explain.
Do you have any health conditions (physical, mental, or emotional) that may prevent you from performing certain tasks? If yes, please explain the condition(s), and any special accommodations you may need.
Have you ever been convicted of: An animal abuse offense? Yes/No A drug offense? Yes/No If yes to any, please explain.
Have you ever been terminated from a volunteer or paid position? If yes, please explain.



Please check ALL areas you are interested in volunteering in:

Animal Care Volunteer:						
Dog Enrichment (Walks, plays, socializes, grooms, etc)						
Laundry						
Dishes						
Transporter (Transport animals to		vents, etc)				
Animal Caretaker (Assist in cleaning of animal kennels)						
Trainer (Train basic behaviors, etc)					
Customer Service Volunteer:						
Adoption Counselor (Educate new pet owners and potential pet owners)						
Office Assistant (Assist with answering phones and general office duties such as filing or organizing)						
Community Programs Volunteer:						
Education (Create educational programs, handouts, school programs, etc)						
Events (Assist with various community/shelter events to represent RAS)						
Fundraising (Assist with raising money for RAS)						
Marketing (Assist with advertising	, etc)					
Other:						
Home Office Assistant (Assist with home data entry of pet licenses, volunteer info, etc)						
Writing (Newsletter, grants, etc)						
Graphic Design (Assist with our website, creating signage, etc)						
Painting						
Landscaping						
Other						
Availability:						
What days are you available? MT	WTHFSASU	_				
What hours are you available?						
Reference Name	Number	Relation				
Reference Name						
All volunteer applications are reviewed	by the Volunteer Manager. Se	lected applicants are contacted with				
orientation dates. Selection of volunte	ers is based on the interests an	d skills of the volunteer, ability to				
demonstrate a commitment to the volu						
Applicant's signature		Date				