



# Quincy Animal Shelter

P0 Box 690088

Quincy, MA 02169-0088

Tel 617-376-1349•Fax 617-745-5736

Email: [volunteer@quincyanimalshelter.org](mailto:volunteer@quincyanimalshelter.org)

[www.quincyanimalshelter.org](http://www.quincyanimalshelter.org)

Quincy Animal Shelter ("QAS") values its volunteers tremendously. Without our Volunteers, the Shelter would not function.

## Steps to Becoming a Volunteer:

1. Complete and return this Application to the Volunteer Coordinator via email to: [volunteer@quincyanimalshelter.org](mailto:volunteer@quincyanimalshelter.org) or regular mail to:  
Quincy Animal Shelter, Volunteer Coordinator, P.O. Box 690088, Quincy, MA 02269-0088.
2. Attend training classes as required for specific activities. All volunteers are on a probationary period until training is completed.

**We require that all Volunteers commit to volunteer for a minimum of two hours per week for a period of at least six months.**

*Please understand that completion of this application does not assure placement. QAS fills the positions and time slots that are needed. Accuracy and completeness of this form are important in determining the acceptability for a volunteer position with QAS. You may be requested to submit additional references and participate in additional interviews, all of which are considered part of the qualification process. All pre-placement inquiries are made for the purpose of establishing your qualifications for placement with QAS.*

## Volunteer Profile

Today's Date: \_\_\_\_\_

Name:	Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address:	E-mail address:
City, State, Zip:	Home telephone:
Cell phone:	Other number (e.g.work):
How did you hear of the QAS Volunteer Program?	
Current or previous work experience: Job Title or Description _____ Place of Employment _____	

**Briefly explain your experience with cats/ dogs and why you wish to volunteer with Quincy Animal Shelter:**

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## Skills and Experience

Have you had any formal education/training in pet care or animal welfare?  Yes  No

Where: \_\_\_\_\_ When: \_\_\_\_\_ Type of education/training: \_\_\_\_\_

Have you done any other volunteer work?  Yes  No

Where: \_\_\_\_\_ When: \_\_\_\_\_ Type of work performed: \_\_\_\_\_

Do you have a special skill (Photography? Writing? Event Planning?) If employed/retired, what have you done for work? \_\_\_\_\_

## Areas of interest, Please check all that apply:

- Canine care     Feline care     Marketing     Fundraising  
 Foster care     Feral cat care     Medical care     Other (Please specify) \_\_\_\_\_

**Do you know any QAS volunteers?** Name(s): \_\_\_\_\_ Relationship: \_\_\_\_\_

**Have you ever been a volunteer at QAS before?**  Yes  No *If yes, when?* \_\_\_\_\_

*If yes, what was your reason for leaving?* \_\_\_\_\_

**Have you adopted an animal from QAS?**  Yes  No *If yes, who did you adopt and when?* \_\_\_\_\_

**Are you a member of any other animal welfare organization?**  Yes  No *If yes, how do you participate?* \_\_\_\_\_

## Availability

Please circle the days/times you are available for volunteer work:

(not required for Foster care, Marketing, Feral Cat care or Fundraising)

Sun	Mon	Tues	Wed	Thurs	Fri	Sat
8:30-10:30 a.m.	8:30-10:30 a.m.	8:30-10:30 a.m.	8:30-10:30 a.m.	8:30-10:30 a.m.	8:30-10:30 a.m.	8:30-10:30 a.m.
4 - 6 p.m.	6 - 8 p.m.	6 - 8 p.m.	6 - 8 p.m.	6 - 8 p.m.	6 - 8 p.m.	4 - 6 p.m.

## Miscellaneous:

Do you have any allergies or conditions that might affect your volunteer work?  Yes  No

If yes, please describe: \_\_\_\_\_

Do you have a valid driver's license?  Yes  No

## Please list a contact in case of an emergency:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Daytime telephone: \_\_\_\_\_ Evening telephone: \_\_\_\_\_