



**WASHOE COUNTY
REGIONAL ANIMAL SERVICES**

2825-A Longley Lane
P.O. Box 11130
Reno, Nevada 89520-0027
Center: (775) 353-8900
Fax: (775) 353-8905
www.washoeanimals.com

Volunteer Application

Contact Information (PLEASE PRINT LEGIBLY)	
Name	Date:
Street Address	
City, State & Zip	
Contact Phone	Alternate:
State Issued or School ID #	
E-Mail Address	
Best Way to Contact:	<input type="checkbox"/> Phone <input type="checkbox"/> Email
Are you 18 yrs or over?	<input type="checkbox"/> Yes <input type="checkbox"/> No Do you own any animals now? Yes <input type="checkbox"/> No <input type="checkbox"/>
Birth Date	(MM/DD/YYYY)
Speak any other languages?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes what Language?
Size of Volunteer Shirt? (Volunteers qualify for a shirt after 20 hours of volunteer credit)	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> LG <input type="checkbox"/> XL <input type="checkbox"/> XXL <input type="checkbox"/> XXXL
Are you employed full time?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Volunteer Interests

X	POSITIONS	X	POSITIONS
<input type="checkbox"/>	Front Office Assistant	<input type="checkbox"/>	Off-Site/Special Events
<input type="checkbox"/>	Animal Care Assistant	<input type="checkbox"/>	Lost/Found
<input type="checkbox"/>	Photographer	<input type="checkbox"/>	Block Walk/Education
<input type="checkbox"/>	Other, Field	<input type="checkbox"/>	Disaster Response

All volunteers are required to attend an orientation and a tour of the facility. Euthanasia is performed at this facility when necessary. Volunteers do not participate in this process at any time.

Have you ever owned or worked with the following animals?

- Dogs
 Reptile
 Rabbits
 Cats
 Birds
 Pocket Pets (hamsters, gerbils)
- Horses
 Other (livestock (goats, sheep, etc.))

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports that could be a benefit to Washoe County Animal Services.

What other organizations have you volunteered for?

How did you hear about the Volunteer program for Washoe County Regional Animal Services?

Why are you interested in volunteering for Washoe County Regional Animal Services?

When was your last tetanus vaccination?

We will require proof of current tetanus vaccination.

Person to Notify in Case of Emergency

Name & relation	
Home Phone	
Work or Cell Phone	

Our Policy & Signature

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

The WCRAS volunteer program is comprised of three tiers, 1 (beginner), 2 (intermediate) and 3 (advanced). All volunteers will begin in tier 1. Before becoming a tier 3 volunteer, you will be required to pass a background check through Washoe County, at no charge.

Applicant Signature	
Date received	Received by:
Accepted By (WCRAS staff)	

Date Contacted

Orientation Date

