

# Volunteer Application Questionnaire

## Royal Oak Animal Shelter

The following guidelines have been established to provide for the use of volunteers at the Royal Oak Animal Shelter.

1. **APPLICATION** - Persons wishing to perform volunteer service at the Animal Shelter must make application for acceptance through the Royal Oak Police Department, Deputy Chief of Staff Services. Applicants must cooperate with the following application procedures:
  1. Complete a written application form provided by the City of Royal Oak.
  2. Consent to criminal history check, as well as any other background investigation deemed necessary by the City.
  3. Complete and sign a liability waiver provided by the City.
  4. Volunteers must be 18 years of age or older.
  
2. **APPROVAL** - The Deputy Chief of Staff Services shall approve or disapprove the application. The Deputy Chief of Staff Services may terminate any volunteer if he deems it to be in the best interest of the City.
  1. Upon approval, the completed Volunteer form will be sent to the Animal Shelter Manager. The Animal Shelter Manager will contact the approved applicant to discuss and schedule days and hours of assignment.
  
3. **PARTICIPATION & RULES OF CONTACT**
  1. Volunteers shall not handle any cash transactions at the shelter.
  2. Volunteers shall at all times obey the instructions of the Animal Shelter attendants and/or officials of the City of Royal Oak.

The applicant hereby acknowledges having read the above program guidelines and agrees to abide by those guidelines.

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Signature of Applicant

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Date

# Volunteer Application Questionnaire

## Royal Oak Animal Shelter

1. Name of Applicant \_\_\_\_\_  
Home Address \_\_\_\_\_  
Home Phone No. ( ) \_\_\_\_\_ Work Phone No. ( ) \_\_\_\_\_  
Cell Phone No. ( ) \_\_\_\_\_  
Social Security No. \_\_\_\_\_ Driver's License No. \_\_\_\_\_
2. Age \_\_\_\_\_ Birth Date \_\_\_\_\_ Birth Place \_\_\_\_\_
3. Employer \_\_\_\_\_  
Position \_\_\_\_\_ Employed Since \_\_\_\_\_
4. List any arrests or convictions for felonies or misdemeanors (provide details) \_\_\_\_\_  
\_\_\_\_\_
5. Are you a member of an animal rescue organization? If yes, describe \_\_\_\_\_  
\_\_\_\_\_
6. The hours of operation are: M - F 4pm to 7pm Sat 10am - noon Sun cleaning only  
What days and hours are you available? \_\_\_\_\_
7. What assignments are you interested in? Dog walking \_\_\_\_\_ Cage cleaning \_\_\_\_\_  
Laundry \_\_\_\_\_ Dish washing \_\_\_\_\_ Special events only \_\_\_\_\_

**I hereby declare that the above information is accurate and complete.**

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

Royal Oak Police Department  
221 E. Third Street  
Royal Oak, MI 48067

**Criminal Record Check Request**

*The below information is required for the completion of a criminal history check.*

Purpose: Animal Shelter Volunteer

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Exact name as it appears on driver=s license

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Address

City

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Driver=s License Number

Expiration Date

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Date of Birth

Social Security Number

Race: \_\_\_\_\_

Sex: \_\_\_\_\_

Height: \_\_\_\_\_

Weight: \_\_\_\_\_

Eye Color: \_\_\_\_\_

Hair Color: \_\_\_\_\_

Authorization of Applicant

I, the undersigned, authorize the Department of State Police, Central Records Division, and the Royal Oak Police Department, to conduct a criminal history file check by name and identifiers to determine the existence of any arrest resulting in conviction and furnish a response to the above requesting agency. Furthermore, I authorize the Royal Oak Police Department to conduct a file check by name and identifiers to determine the existence of any contacts, whatsoever, between myself and any law enforcement agency.

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Signature of Applicant

Date

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Requested By (to be completed by department):

Signature: \_\_\_\_\_

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

Title: \_\_\_\_\_

