



**Division of Public Services and  
Neighborhoods**  
**Memphis Animal Services**  
**3456 Tchulahoma Road**  
**Memphis, TN 38118-2710**  
**Phone: (901) 363-1416**

**APPLICATION FOR VOLUNTEER SERVICE**

The information requested on this form is needed to initiate the applicant review process and to assist in determining the applicant's eligibility for volunteer service with the City of Memphis Animal Services. The information provided will be used by the Memphis Animal Services solely for this purpose and will be subject to verification. Eligibility for volunteer services is considered without regard to race, color, religion, gender, nationality, age, sexual orientation, disability, marital or veteran status, or any other legally protected status.

**Please provide the requested information accurately and completely. Please print in ink or type.**

<b>Name:</b>	<b>Date:</b>		
<b>Home Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>
<b>Home Phone:</b>	<b>Business Phone:</b>		
<b>Cell Phone:</b>	<b>Email Address (optional):</b>		
<b>Emergency Contact:</b>	<b>Phone:</b>		
<b>Employer:</b>	<b>Occupation:</b>		
<b>Work Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>

*Additional paper may be used if additional space is required.*

1. Have you ever been convicted of or plead guilty to any crime(s)? Yes [ ] No [ ]  
If yes, describe each in full: \_\_\_\_\_  
\_\_\_\_\_
2. Have you ever been refused participation in any City of Memphis volunteer program? Yes [ ] No [ ]  
If yes, describe each in full: \_\_\_\_\_  
\_\_\_\_\_
3. Do you have any allergies or health problems that may prevent you from certain activities?  
Yes [ ] No [ ]  
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

**APPLICATION FOR VOLUNTEER SERVICE**

4. Special certification (i.e. CPR, Medical, etc.): \_\_\_\_\_

\_\_\_\_\_

5. Special professional training, skills, or hobbies: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Describe history of pet ownership or previous experience with animals: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. Community affiliations (Clubs, Service Organizations, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8. Previous or current volunteer experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Availability:**

Sun [ ] Mon [ ] Tues [ ] Wed [ ] Thurs [ ] Fri [ ] Sat [ ]

Hrs. Available Day: \_\_\_\_\_ Evening: \_\_\_\_\_ Weekend: \_\_\_\_\_

9. Please list your interest area(s) for volunteer work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

10. Are you interested in serving on a non-profit board? Yes [ ] No [ ]

11. Please list three (3) references, at least one (if possible), which have knowledge of your participation in a volunteer program.

*Name*

*Phone No.*

1.	
2.	
3.	

**APPLICATION FOR VOLUNTEER SERVICE**

I hereby certify that the information set forth in this application is true and complete to the best of my knowledge. I understand that any misrepresentations or falsified statements included herein shall be considered sufficient cause for denial or dismissal whenever discovered.

I certify that I have read and understand this entire document, and I agree that a copy of this document is as valid as the original.

\_\_\_\_\_  
**Applicant's Signature**

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

-----

**(For Animal Services use only)**

Approved: \_\_\_\_\_

Criteria applied: \_\_\_\_\_

Denied: \_\_\_\_\_

\*Justification: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_

Animal Services Administrator