



**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.

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

Additional paper may be used if additional space is required.

- Have you ever been convicted of or plead guilty to any crime(s)? Yes [] No []
 If yes, describe each in full: _____

- Have you ever been refused participation in any City of Memphis volunteer program? Yes [] No []
 If yes, describe each in full: _____

- Do you have any allergies or health problems that may prevent you from certain activities?
 Yes [] No []
 If yes, explain: _____

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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.	

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The applicant hereby acknowledges that a background check is required by the City of Memphis for the sole purpose of determining the applicant's eligibility to provide his or her volunteer services. Accordingly, the applicant hereby makes the following statement of his own free will and voluntarily provides the following information:

Drivers License No.: _____ Date of Birth: _____

Gender: _____ Social Security No.: _____

Height: _____ Weight: _____

Do you have any criminal charges pending? Yes () No () If yes, explain:

As a condition of volunteering, I hereby authorize the City of Memphis ("City") and its designated agents, to obtain criminal background reports and/or investigative reports (personal/professional reference checks) about me for the purpose of evaluating me as a volunteer on behalf of the City of Memphis. I hereby acknowledge that the City of Memphis may obtain such information at any time prior to, or during, my participation as a volunteer, without giving me any additional notice.

I FURTHER AUTHORIZE CURRENT AND FORMER EMPLOYERS, ORGANIZATIONS, AND ANY GOVERNMENTAL, LAW ENFORCEMENT, CRIMINAL JUSTICE AGENCIES TO PROVIDE ALL INFORMATION REQUESTED WITH RESPECT TO MY BACKGROUND, INCLUDING WITHOUT LIMITATION, ANY CRIMINAL RECORDS.

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, including the foregoing AUTHORIZATION, 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

** Only attach to this application a copy of the background check that reveals any convictions of this applicant.*