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Dear Prospective Volunteer;

The London Humane Society thanks you for your interest in our Volunteer Program. Please note volunteer positions are available only to those who are 18 years of age or older.

There are a number of volunteer positions and programs available at our shelter. Some of these programs involve direct contact with the animals in our care, while others are to support fundraising and events, including community events or off-site adoption events. Please take a moment to fill out the attached application form and either email or deliver it to the London Humane Society at the above address with one written reference.

Please note we have a waiting list for volunteers. You will be contacted to arrange an interview only if we have current opportunities that match your area of interest and your current availability. Acceptance will be determined following a telephone interview and an orientation session(s) associated with your program of interest.

Sincerely,

Sheila

Sheila Harrison
Director of Operations
London Humane Society

Shelter Hours:

Adoptions:

Monday-Friday
Saturday & Sunday
Closed Holidays

1pm to 6pm
1pm to 4:30pm

Administration:

Monday-Friday
Closed weekends and Holidays

9am to 5pm



The London Humane Society Volunteer Application Form

For Office Use Only

S.C. _____

Events _____

Other _____

Availability _____

Personal Profile

Name: _____

Address: _____

Unit #: _____

City: _____

Postal Code: _____

Phone (Home): _____

(Cell): _____

E-mail Address: _____

Date of Birth (dd/mm/yyyy) _____

/

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If you are a student, please check your availability:

Year round

School year only

Level of education completed: _____

Are you presently employed?

Yes

No

Name of employer/job title (Optional): _____

Do you have any known health issues that would affect you as a volunteer? (Allergies, back problems, etc.) _____

Emergency Contact Information

Name: _____

Phone Number: _____

Relationship: _____

Reference Check

*** Please note that your name will be entered into our Investigations Department database for cross-referencing before your application will be considered.*

Please include one professional/volunteer reference (business, organization, school, medical).

****We ask that you have them complete the attached Reference Check Form.**

Name: _____ Title: _____

Phone: _____

Previous Volunteer Experience

If you have had any previous volunteer experience, please list the organization and contact person below.

Organization:	Year:
Contact Person:	Phone:
Position Title:	
Organization:	Year:
Contact Person:	Phone:
Position Title:	

Skills and Experience

- | | | |
|---|---|--|
| <input type="checkbox"/> Handling Animals | <input type="checkbox"/> Grooming | <input type="checkbox"/> Formal Dog Training |
| <input type="checkbox"/> Public Relations/Marketing | <input type="checkbox"/> Computer Skills | <input type="checkbox"/> Administration |
| <input type="checkbox"/> Event Organizing | <input type="checkbox"/> Photography Skills | <input type="checkbox"/> Art/Design |
| <input type="checkbox"/> Sales | <input type="checkbox"/> Sewing/Knitting | <input type="checkbox"/> Other _____ |

Areas of Interest (check all that apply)

Shelter Volunteering:

- | | |
|---|--|
| <input type="checkbox"/> Dog walking | Do you currently own a dog? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Cat socializing | Do you currently own a cat? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Rabbit and small animal care | |

Shelter Volunteering Commitment:

Can you commit to a regularly scheduled weekly visit to the shelter? Yes No

If Yes, which day(s) of the week are you available?

At what time of the day are you available? _____

Please note our available volunteer hours:

Cat and Small Animal Volunteers:

Monday-Friday 9am to 5pm
Weekends and Holidays 9am to 4pm

Dog Volunteers:

Monday-Friday 12pm to 6pm
Weekends and Holidays 12pm to 4pm

We are **not** open during the evenings.

Reference Check

*** You will be asked to provide personal reference information if you are asked to participate in an interview. This form is confidential and voluntary.*

Date:

Name of Applicant:

How long have you known this person?

In what capacity have you known this person? _____

In your opinion, is this person responsible? Reliable?

In your opinion, can this person work well with others?

Are you aware of other volunteer work in which this person is involved? If so, please list that work) _____

Please tell us about any special talents you believe this person has.

Additional comments: _____

Your name:

Address:

Unit #:

City:

Postal Code:

Phone (Home):

(Cell):

E-mail Address:

Signature

Please return to:

Sheila Harrison

Director of Operations

London Humane Society

519-451-0630 ext. 228

sharrison@londonhumane.ca