



**City of Gardner
Department of Personnel
95 Pleasant Street
Gardner, MA 01440
(978) 630-4001 ♦ Fax (978) 630-4025**

Animal Control Facility Volunteer Application

Name: _____

Address: _____
Street City/Town State Zip Code

Home Phone: _____ Work Phone: _____

Email Address: _____

Why are you interested in volunteering at the Gardner Animal Control Facility?

What companion animals do you currently care for? _____

What, if any, experience do you have working with animals? _____

List previous volunteer experience:

Agency _____ Length of Time _____ Contact Name & Phone No. _____

In case of an emergency or illness please notify:

Name: _____ Relationship: _____

Address: _____
Street City/Town State Zip Code

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Provide two (2) personal references who can attest to your interest, interaction, and feelings about animals in general, dogs and cats specifically:

1. Name: _____ Relationship: _____

Address: _____
Street City/Town State Zip Code

Home Phone: _____ Work Phone: _____

2. Name: _____ Relationship: _____

Address: _____
Street City/Town State Zip Code

Home Phone: _____ Work Phone: _____

Please check all of the ways in which you are available to assist as a volunteer:

- Clerical Support (filing, data entry, phone messages)
- Fundraising
- Facility Cleaning (laundry, sweeping and cleaning office and general lobby area)
- Animal Care Area Cleaning (clean kennels inside and outside) Cat Dog
- Animal Socializing (spending time with animals) Cat Dog
- Dog Walking

When are you available to volunteer time at the Animal Control Facility?

- Weekdays (please circle): Monday, Tuesday, Wednesday, Thursday, Friday
- Weekends
- Time of Day: (please circle): Mornings Afternoons Evenings

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 being reprimanded and/or immediate dismissal. I am also aware that there be additional guidelines given to me upon the approval of my application and I agree to adhere to those guidelines as a condition of my continued acceptance as a volunteer with the Gardner Animal Control Facility.

Applicant Signature: _____ Date: _____

If the applicant is under the age of 18 years old, a parent or guardian must sign his/her consent to the terms and conditions of this application below:

Parent/Guardian Signature: _____ Date: _____

I understand that the City of Gardner will conduct a background check prior to acceptance as a volunteer for the Animal Control Facility. I agree to provide the necessary information as requested and further understand that said background check may include a review of sex offender registries and criminal history records (CORI request form attached hereto for execution by applicant).

Applicant Signature: _____ Date: _____

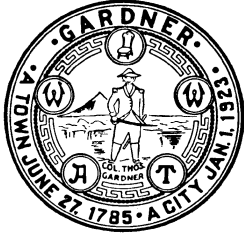
I hereby acknowledge that working at the City of Gardner Animal Control Facility entails working with and around animals, which can expose me to certain personal safety risks. I, for myself, my personal representatives and dependents hereby release, indemnify and hold harmless the City of Gardner (the "City"), its elected officials, directors, employees, agents and other volunteers from any and all liability in connection with any injury I may sustain, including any injury caused by negligence, in conjunction with the volunteer activities for the City. Further, I, for myself, my personal representatives and dependents hereby release, indemnify and hold harmless the City, its elected officials, directors, employees, agents and other volunteers from all damages, judgments, expenses, including reasonable attorney fees, costs of liabilities in law or equity suffered because of damage to my personal belongings or any property that may arise out of, or as a consequence of my negligent or intentional acts while volunteering for the City.

I understand that as a volunteer, I am not an employee of the City, that my involvement will not lead to employment status, that I will not be eligible for employee benefits or worker's compensation insurance coverage and that I will receive no compensation for my services. I understand that I must operate within the scope of the duties associated with my volunteer position, a description of which will be provided to me should I be accepted and approved as a volunteer for the City.

Applicant Signature: _____ Date: _____

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Parent/Guardian Signature: _____ Date: _____



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CORI REQUEST FORM

Gardner Municipal Government has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data. As an applicant for Animal Control Facility Volunteer, I understand that a criminal record check will be conducted for conviction and pending criminal case information only and that it will not necessarily disqualify me. The information below is correct to the best of my knowledge.

Applicant Signature

APPLICANT/EMPLOYEE INFORMATION (PLEASE PRINT)

LAST NAME

FIRST NAME

MIDDLE NAME

MAIDEN NAME OR ALIAS (IF APPLICABLE)

PLACE OF BIRTH

DATE OF BIRTH

_____-_____-_____
SOCIAL SECURITY NUMBER
(Requested but not required)

MOTHER'S MAIDEN NAME

FORMER ADDRESSES: _____

SEX: _____ HEIGHT: _____ ft. _____ in. WEIGHT: _____ EYE COLOR: _____

STATE DRIVER'S LICENSE NUMBER: _____

***THE ABOVE INFORMATION WAS VERIFIED BY REVIEWING THE FOLLOWING FORM OF GOVERNMENT ISSUED PHOTOGRAPHIC IDENTIFICATION: _____

REQUESTED BY: _____
SIGNATURE OF CORI AUTHORIZED EMPLOYEE