

OFFICE USE ONLY

VOLUNTEER PIN #

CITY OF LOS ANGELES DEPARTMENT OF ANIMAL SERVICES

VOLUNTEER APPLICATION

Volunteer Office Phone: (213) 395-1163 ani.volunteers@lacity.org

PLEASE PRINT CLEARLY!

Thank you for your interest in volunteering with us!

To speed the processing of your application, please answer every question thoroughly.

Note: All applicants must be at least 16 years of age. Applicants under 18 must attend the orientation with a parent or legal guardian.

Preferred Volunteering Location: E. Valley [] Harbor [] North Central [] South LA [] West LA [] West Valley []

BASIC INFORMATION

Last name	First	name	Middle name	
Address	City	State	Zip code	
() Home phone	() Cellular phone	() Work phone		
E-Mail Address:				
How did you hear ab	out the Department of A	Animal Services' Volunteer Pro	ogram?	
FlyerFrien	dDepartment web	siteSchoolShelter	Other:	
Are your volunteer h	ours required for a class	s/community service credit? `	YES [] NO []	
			_ Required date of completion: ity service credit for court referrals)	
Name, address and p	phone number of school	or organization requiring serv	vice hours:	
NOTE: LAAS requir	es a minimum of 30 v	olunteer hours before sigr	ing off community service credit.	
TELL US ABOUT YO	<u>)U</u>			

 Date of birth: ____/____ If under age 18, please provide year born: _______

 Are you bilingual? YES [] NO [] Indicate language(s): _______ Spoken? [] Written? []

What is your gender?				
		nteered for the City of Los Angele se list years of employment/volunt		
Current occupation:		_ Current Employer:		
	, .	ation? If yes, please provide the	5	
		related business? YES [] NO [] .:		
What special skills do yo	ou have?			
Visual artist []	Carpenter []	Computer skills []	Customer service []	
Dog training []	Fundraising []	Gardening []	Graphic design []	
Groomer []	Interior decorating []	Organizational skills []	Photography []	
Public speaking []	Sewing []	Social media skills []	Writing []	
	or friends who currently would have and work location:	ork or volunteer for the LAAS? YE	S[]NO[]	

EMERGENCY CONTACT INFORMATION

Name	() Telephone number		Relationship		
	·				
Address	City	State	Zip code		
	Please provide some detail in y	our answers be	elow:		

Why do you want to volunteer?

Describe any past experience you've had with your own companion animals, or animals in general.

Work at the Department of Animal Services is not only animal-related but also involves constant contact with the general public. How do you feel about communicating with diverse groups of people?

Describe any past experience you have had with working with the public, either as a volunteer or in a paid position.

The Department of Animal Services is a public safety agency and operates under a "chain of command" organizational structure. How do you feel about taking directions from others and working collaboratively with other volunteers and staff?

While we try our best to help each animal in our care find a home, there are instances when an animal, due to space, medical, behavior or other reasons must be humanely euthanized. Although you will not be involved in the process, we would like to know how you feel about it.

Some tasks performed by volunteers include lifting, bending, or carrying cages or other heavy supplies as well as handling, grooming or moving large animals. Some volunteer positions require the ability to safely return animals to their appropriate cages/kennels and to read kennel cards. Volunteers must be alert at all times while working around unpredictable and dangerous animals. Is there anything that would prevent you from performing any of the aforementioned tasks: YES [] NO []

If yes, please explain:

BACKGROUND INFORMATION

Your application is subject to a complete background review, including a review of criminal convictions. Applicants applying for specific positions will be fingerprinted and processed through State/Federal agencies for this purpose. Disqualification may result from factors considered in the review. Factors such as the relationship between the offense and the job for which you apply will be taken into account. This information will be kept confidential.

By signing below, you give LAAS permission to conduct a background review and/or check references.

Driver's license/I.D.#	C+-	ate issued E	Evn dat		/
DUVer S UCEUSE/1.D.#		ale issued – – – – – – – – – – – – – – – – – – –	zxp. dat	e:	/

Circle last level of education completed: 8 9 10 11 12 Some College Associates Bachelors Masters PhD.

Have you ever been convicted of any crimes, including both felony and/or misdemeanor? (Do not include minor traffic violations) YES [] NO []

If yes, please list all convictions (Use additional sheets if necessary):

Offense	Date	Location
Fine/Sentence		
Offense	Date	Location
Fine/Sentence		

Are you currently on probation, parole or awaiting trial for any level of criminal or civil charge? YES [] NO[]

I declare that all statements on this application form and attachments are true and complete to the best of my knowledge. I understand that false, misleading or incomplete information shall be cause for disqualification, or removal from the volunteer program at a later date.

Signature	Date	
Print name		
Signature of parent or legal guardian (Required for applicants under 18 years old)	Date	

Thank you for your interest in volunteering!

The next step is to bring your completed application to a Volunteer Orientation.

How to find upcoming orientation dates:

www.facebook.com/LAASvolunteers

www.laanimalservices.com

Orientation schedules are also posted at each of our six Animal Services Centers