

FOR STAFF USE ONLY – DATE RECEIVED _____



Questionnaire for Potential Volunteers

DAN COSGROVE ANIMAL SHELTER

749 East Main St

Branford, CT 06405

www.branfordanimalshelter.org

203-315-4125 – Fax 203-315-3851

All New Potential Volunteers Please Fill out This Form and we will contact you for the next available orientation.

Potential Volunteer Name _____

Phone Number _____

Please initial here that you've received and read the manual: _____ / Date _____

Understanding Our Volunteers

Can you commit to the required hours? _____

Do you have any pets or have you in the past?

Have you volunteered anywhere before/if so where and for how long?

Why did you leave there?

May we call them for a reference? _____

What do you hope to gain from volunteering?

Have you ever been convicted of a crime/felony?

Yes or No

Please Explain

What is your feeling on euthanasia?
