

sean casey animal rescue

Specializing in the Rescue,
Rehabilitation & Placement of Reptiles,
Amphibians, Exotic & Domestic Animals

Windsor Terrace
153 East 3rd Street
Brooklyn, New York 11218

volunteer@nyanimalrescue.org

Volunteer Application

MISSION STATEMENT

Our purpose is to aid unfortunate animals so that they may get a higher quality of life. We take in rescued, confiscated, neglected, injured, ill, unmanageable, or unwanted animals from private owners, zoos, shelters, and other public organizations. These animals are cared for, and/or rehabilitated to the best of our ability and means until which time they can be found healthy, happy homes - whether it be through adoption to qualified candidates or legally released into habitats suitable to the specific species in conjunction with licensed wildlife rehabilitators.

WHY ARE VOLUNTEERS NEEDED?

As a nonprofit, no-kill, rehabilitation shelter, we always need support and help. By volunteering, you will make the jobs of our staff easier, allow the shelter to run smoother, and most importantly, help the animals.

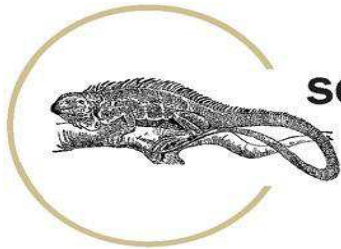
There are many ways you can help us. To name a few jobs, you can support us by walking dogs, cleaning after animals, and/or grooming.

PERSONAL CONDUCT

SCAR expects its volunteers to maintain a high standard of conduct and work performance to make sure the Rescue maintains its good reputation with the community, supporters, and patrons. Good personal conduct contributes to a good work environment for all.

Please keep these things in mind as you volunteer:

- Treat staff, visitors, and others with courtesy and respect
- Treat the animals in a professional and caring manner
- Be proud of your professional appearance, language, and behavior
- Observe all policies and procedures
- Work safely at all times



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To become a SCAR Volunteer:

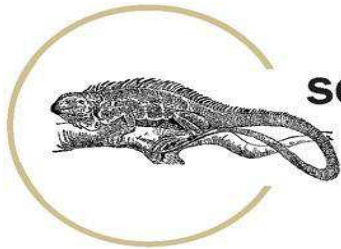
- You must be at least 13 years old to volunteer without a parent or a guardian
- Children 4-12 years old can volunteer when accompanied by a parent/guardian
- **Complete a volunteer application and assessment form** (for first-time volunteers)
- Email address is required
- Bring picture ID and proof of address
- **Attend a Volunteer Orientation Class**
- Spread the message about responsible pet ownership and animal protection

Volunteer assignments will be made in accordance with your interests, abilities, and vocational goals and in accordance with the needs of the Shelter.

The one hour orientation class will help you feel comfortable in your new role as a SCAR Volunteer and provide you with an overview of our cause, policies, volunteer opportunities, facilities, and hands-on animal handling instruction. When you complete and submit this application you can choose to volunteer your time for non-animal related services such as construction or administrative help. When you submit your application you agree to:

- Sign in and out every time you volunteer
- Accept and abide by the policies of the rescue
- Represent the rescue as a volunteer in a responsible and respectable fashion
- Be in good health, or have a note from doctor if you have certain disabilities or aches.

If you have any questions about our Volunteer Program, please email us anytime at volunteer@nyanimalrescue.org.



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VOLUNTEER APPLICATION AND ASSESSMENT FORM

Full Name _____ Date of Birth ____/____/____

Parent/Guardian Name (if under 18 years) _____

Address _____ City _____ State _____ Zip _____

Phone# (cell) _____ Home# _____

Email _____

Name of present workplace _____

Position _____ Work Phone _____

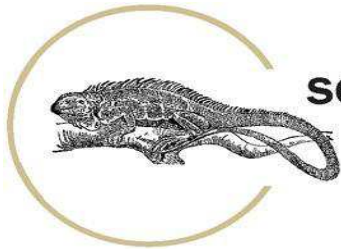
Previous volunteer experience:

Why do you want to volunteer at the Sean Casey Animal Rescue?

Do you have any disabilities that need to be accommodated? If so, please explain:

Do you own pets? Dogs _____ Cats _____ Other _____ - Spayed/Neutered? (circle one) YES NO

Describe your experience working with animals:



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Availability: During which times are you available?

Location	Weekday A.M. 11am - 4pm	Weekday P.M. 4pm - 8pm	Weekends A.M. 11am - 4pm	Weekends P.M. 4pm - 8pm
Windsor Terrace				

Explain availability schedule further please:

1. Do you have a computer connected to the internet at home? YES NO
2. Time 1 – will you be able to work from home? (Virtual) YES NO
3. Time 2 – will you be able to come into the office? YES NO

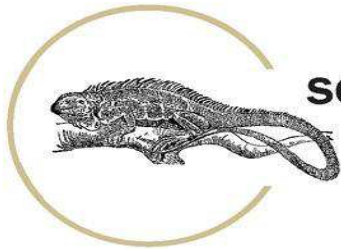
Please indicate the areas that interest you - Circle all that apply:

- | | |
|--|--|
| Dogs <input type="checkbox"/> | <input type="checkbox"/> Office/ Administrative/ Training |
| Cats <input type="checkbox"/> | <input type="checkbox"/> Special Events |
| Exotics / Other <input type="checkbox"/> | <input type="checkbox"/> Tasks that do not involve animals |
| Cleaning <input type="checkbox"/> | |

Please indicate the skills you have:

- ✓ Administration/ Organizational Support _____
- ✓ Communications/ Marketing _____
- ✓ Construction/ Maintenance _____
- ✓ Animal Services _____
- ✓ Education _____
- ✓ Special Event Support _____
- ✓ Transportation _____
- ✓ OTHER: _____

****You can look at our various Volunteer Job Descriptions (separate from this) to see which job(s) you would like to do.**



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Evaluation

Please select all the options that apply to you:

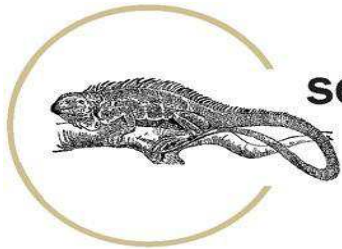
- I have carefully considered my schedule and I know I can make a commitment to volunteering at the rescue
- I know that some of the animals are recovering from illness and injury and I am comfortable working with them
- I am aware that I may need to pick up/clean up after animal feces and urine.
- I treat my volunteer commitments with the same respect that I do with work obligations
- I hope my volunteer work with the rescue will lead to a job with the rescue
- I am in between jobs and am hoping to use my free time to be of service
- I hope to meet other people and expand my social network
- I want to use volunteering to improve my English speaking skills
- I am seeking an opportunity to gain experience in a shelter to add to my resume

All new volunteers are required to complete a Volunteer Application, and attend a Volunteer Orientation Class. **The volunteer orientation class is 1 hour long and happens every second and fourth Thursday of each month from 7-8PM.**

Signature _____ Date _____

Please Read Carefully Before Completing, Signing and Submitting this Application

**Please complete and bring with you to the next
Orientation held every 2nd & 4th Thurs @ Windsor Terrace from 7-8pm.**



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Volunteer Waiver and Release of Liability, Indemnification and Hold Harmless Agreement

This Waiver and Release of Liability, Indemnification and Hold Harmless Agreement (“Agreement”) is between the Volunteer and Sean Casey Animal Rescue (“SCAR”), 153 East 3rd Street, Brooklyn NY and its directors, officers, members, employees, agents, assigns, legal representatives and successors.

As a volunteer that is 18 years old or older, I hereby understand and agree to the following: I agree to WAIVE and RELEASE SCAR from all liability, manner of actions, causes of action, debts, contracts, claims and demands for or by reason of any illness, death, damage, loss or injury to person and property, which has been or may be sustained as a direct or indirect consequence of the Volunteer’s volunteering at or for SCAR and notwithstanding that such damage, death, illness, loss or injury may have been caused partly by the negligence of SCAR. I agree to INDEMNIFY and HOLD HARMLESS SCAR for any costs or liabilities which they may incur as a result of my volunteering at or for SCAR.

I acknowledge and agree that I have carefully read this Agreement, that I fully understand the Agreement, and that I freely and voluntarily execute the same. I understand that I may seek independent advice prior to signing this Agreement. I understand that this Agreement is binding on me, my spouse, my executors, administrators, personal representatives and assigns and that this Agreement has important legal consequences. The terms of this Agreement are contractual and not mere recitals. This Agreement will be construed in accordance with and governed by the laws of the State of New York.

Signature of Volunteer: _____ Date: _____

Signature of Parent: _____ Date: _____
(If under 18 years)

Emergency Contact Phone: _____

Relationship of contact: _____

If insured, name of medical insurance carrier and policy number:

***Thank you for completing this application and for your interest in volunteering with us.
Please note, completing this form does not guarantee placement as a volunteer with SCAR.***