



Thank you for your interest in becoming a volunteer with Dogs with Wings. This application gathers information we need for a number of different volunteer assignments so **not all sections will be appropriate** for your interest. Complete the first section and then go to the program area you are interested in. We are interested in knowing as much about you as we can to be sure you get involved in the right area. Use extra space for your answers should you need to.

**VOLUNTEER APPLICATION**

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

OCCUPATION (S): \_\_\_\_\_

ARE YOU OVER THE AGE OF 18? \_\_\_\_\_

HOW DID YOU HEAR OF US? \_\_\_\_\_

HOBBIES/SPECIAL SKILLS (eg: computer skill, handyman, animal health...): \_\_\_\_\_

ANY MEDICAL/HEALTH CONDITION THAT WE SHOULD BE AWARE OF: \_\_\_\_\_

WHAT LED YOU TO APPLY TO DWW AS A VOLUNTEER? \_\_\_\_\_

WHICH VOLUNTEER PROGRAM ARE YOU INTERESTED IN (see description of each program on our website):

Traditional Puppy Raiser

Early Education Puppy Raiser (Peep)

Adult Raiser

Boarding Home

Kennel Assistant

Other (eg: office work, fundraising event): \_\_\_\_\_

DO YOU HAVE A SECOND CHOICE VOLUNTEER PROGRAM:

No thank you

Traditional Puppy Raiser

Early education Puppy Raiser (Peep)

Adult Raiser

Boarding Home

Kennel Assistant

Other (eg: office work, fundraising event): \_\_\_\_\_

**AT HOME**

ARE YOU WILLING TO HAVE A DOG LIVE IN THE HOUSE AS A MEMBER OF YOUR FAMILY:  YES  NO

PROPERTY: Owned  Rented

NUMBER OF ADULTS AND AGE OF CHILDREN AT HOME: \_\_\_\_\_

IS YOUR YARD FENCED AND SECURE:  YES  NO

IS THERE ANY AREAS OF YOUR HOME THAT WOULD BE OUT OF BOUND AREAS:  YES  NO  
DETAILS: \_\_\_\_\_  
\_\_\_\_\_

DO YOU AGREE NOT TO LEAVE THE DOG ALONE AT ANYTIME:  YES  NO

COMMENT: \_\_\_\_\_

IS ONE ADULT AT HOME DURING THE DAY:  YES  NO

DETAILS: \_\_\_\_\_

HAVE YOU HAD ANY EXPERIENCE WITH DOGS OR TRAINING:  YES  NO

DETAILS: \_\_\_\_\_  
\_\_\_\_\_

**KENNEL ASSISTANT:**

WHAT IS YOUR AVAILABILITY? (DAYS OF THE WEEK/HOURS AVAILABLE):

\_\_\_\_\_

HOW LONG ARE YOU ABLE TO COMMIT FOR?

\_\_\_\_\_

**BOARDING HOME**

WHEN ARE YOU AVAILABLE TO BOARD (WEEK-DAYS OR WEEK-ENDS):

\_\_\_\_\_

WHAT AGE OF DOG ARE YOU WILLING TO TAKE (PUPPY OR ADULT):

\_\_\_\_\_

WOULD YOU BE INTERESTED IN LONG TERM BOARDING ( 1 week - 1month):

\_\_\_\_\_

PLEASE INDICATE SPECIFIC TIMES OR DAYS THAT YOU ARE NOT AVAILABLE FOR BOARDING:

\_\_\_\_\_

**TRADITIONAL PUPPY RAISER, ADULT RAISING PROGRAM AND BOARDING HOME**

DO YOU HAVE ANY PETS AT THE MOMENT?:  YES  NO IF YES:

1. HOW MANY? \_\_\_\_\_

2. WHAT ARE THEY? \_\_\_\_\_

3. HOW OLD ARE THEY? \_\_\_\_\_

4. ARE THEIR VACCINATIONS UP TO DATE? \_\_\_\_\_

**TRADITIONNAL PUPPY RAISER, PEEPS, ADULT RAISING PROGRAM AND BOARDING HOME**

WHEN WOULD YOU BE ABLE TO TAKE A DOG (IF ACCEPTED):

---

ARE YOU PREPARED TO COME TO THE OFFICE & OTHER AREAS OF EDMONTON FOR TRAINING LESSONS AND OTHER EVENTS?

YES  NO

DO YOU HAVE A PREFERENCE FOR THE COLOUR OR SEX OF THE DOG:  YES  NO

DETAILS: \_\_\_\_\_

ARE YOU PREPARED TO TRANSPORT THE DOG TO & FROM THE OFFICE DAILY? (This question does NOT apply for the Traditional Puppy Raiser Program)  YES  NO

DETAILS:

---

IS THERE ANTYTHING ELSE YOU WOULD LIKE US TO KNOW, OR COMMENTS YOU WOULD LIKE TO MAKE:

---

---

---

---

---

---

**Personal Reference:**

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Years Know: \_\_\_\_\_

**Professional Reference:**

Name: \_\_\_\_\_

Occupation or company:

\_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Years know: \_\_\_\_\_

Please, if you can't provide professional references explain why:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_