General Volunteer Application

Name:				
Address:				
City:	State:	Zip:		
Email:		Phone:		
Cell Phone:	Age:			
Animal - related areas need Providing rides for clients and Delivering pet food Purchasing or picking up pet food Assisting with routine pet care Providing emergency foster care Helping at Pet Partners Team Please describe any animal care	food (ElderPet re e at owner's hon are or pet sitting Evaluation as pa	elated appointmelimburses cost of the crowd	of pet food) Cats? Cats? (Always a weeken	
2. Would you be willing to underg	go a criminal ba	ckground check	? (ElderPet covers	the cost)
3. While ElderPet has Volunteer L liability. Is your vehicle insured?	J	ce, you should a e amount of the	1	onal
4. In what geographic locations we Rockingham County and Strafford	• •	to work? (We se	rvice Seacoast area	of
5. What days of the week and time	es would routine	ly be convenien	t for you?	
6. Describe other types of voluntee	er work vou hav	e done or are no	w doing	

7. Please list 2 personal references with contact information.

General Areas Needing Volunteers: Please check the boxes that represent your skill level.

Administrative & General				
Office Skills	Limited	Average	Very Good	Excel
File & maintain records				
Plan meetings				
Mass Mailings (Mail merge)				
Editing brochures and publications				
Finance Skills				
Analyze financial data				
Budgeting				
QuickBooks Proficiency				
Create spreadsheets				
Marketing Skills				
Create marketing plans				
Event planning				
Develop marketing strategies				
Technology Skills				
Excel				
PowerPoint				
Website design and management				
Social Media				
Database Management				
Professional Skills				
Public Speaking				
Community Affairs Knowledge				
Write proposals & reports				
Supervising Volunteers				
Fundraising				
Other Skills (Please List)				

Please return this form to:

ElderPet, PO Box 624, Durham, NH 03824 or email elderpet@gmail.com