



Volunteer Application

If you wish to volunteer to provide assistance for I Stand With My Pack, please complete this application and return it to:

info@iswmp.org

I understand and agree that I am volunteering my time and services to be an ISWMP volunteer at no cost to ISWMP and I will not be compensated for either my time or services by ISWMP. I also understand, that I may be removed from this position at any time by the founder Aleksandra Schiffer in her sole discretion for any reason or no reason.

Personal Information

Applicant Name:

E-mail:

Address:

Cell Phone:

Best time to call:

Preferred phone number for calls:

Have you ever owned dogs before? ____ yes ____ no

If so, explain your experiences and activities with them.

Areas of Interest

Please check all the jobs listed below that you would be interested in helping with.

Fundraising

Give brief overview of your experience in this area:

Dog evaluation in private homes

Dog evaluation in shelters

Dog transportation

Behavior modification

Other dog handling skills _____

Experience in these areas:

Telephone work

Letter writing

Design/Update of Website

Please describe:

Other

Explain any other areas in which you might be of assistance.

On the next page, please provide at least two references that have personal knowledge of your care and experience working with dogs, and the name and address of your current veterinarian, if you have a dog yourself.

Veterinarian Reference

Name _____

Address _____

City _____ State _____

Zip _____

Phone _____

Personal Reference

Name _____

Address _____

City _____ State _____

Zip _____

Phone _____

Credentials, if any (such as rescue volunteer or breeder):

Personal Reference

Name _____

Address _____

City _____ State _____

Zip _____

Phone _____

Credentials, if any (such as rescue volunteer or breeder):

Would you be willing to let one of our representatives visit your home by appointment?

_____ yes _____ no

If not, why?

All of the above information I have given is true and complete. I agree to follow all the Rules and Procedures of ISWMP.

I understand that the dogs/animals in general I will be handling were previously unwanted or lost and may be rescued by ISWMP from dangerous, unhealthy and/or cruel situations. This can have long-lasting effects on the animals.

I understand that ISWMP is making no representations or warranties about the condition, personality, or temperament of any of the animals.

ISWMP will only give me the information and knowledge ISWMP have through observation and vet checks since ISWMP met the animal in question: ***I will therefore not hold ISWMP responsible for any damage, injury, or harm caused directly or indirectly to any person or property by any animal I may decide to volunteer my time to help.***

ISWMP, AT ITS SOLE DISCRETION, RESERVES THE RIGHT TO REFUSE ANY APPLICANT FOR ANY REASON OR NO REASON.

Applicant Signature

Date: _____



Thank you for volunteering to become a volunteer for ISWMP. One of our volunteers should be contacting you shortly after receiving your application.