



CANINE PARTNERS OF THE ROCKIES, INC.
PO Box 460214 - Denver, CO 80246 - 303-399-4575
caprvolunteer@dim.com
www.caninepartnersoftherockies.org
"One Person, One Dog, Partners In Life."

Volunteer Application for Canine Partners of the Rockies, Inc.

- 1. Please take a moment to review volunteer job descriptions on CaPR's web site at www.caninepartnersoftherockies.org prior to completing this application.**
- 2. Read the confidentiality statement at the end of this application and make sure you agree.**
- 3. COMPLETE APPLICATION. In order to ensure the best possible volunteer experience, please complete the entire application. Volunteers must be age 16 or older, except with approval of the volunteer supervisor and the consent of a parent or guardian.**

Name: _____

Address: _____

City: _____ **State:** _____ **Zip code:** _____

Home telephone number: _____

Work Phone number: _____

E-mail address: _____

Employed at: _____

Education (check highest earned):

No degree High school degree College degree Graduate degree

Are you volunteering for a course requirement? Yes No

Are you volunteering to fulfill a community service? Yes No

Check all the areas for which you are willing to volunteer:

General Volunteer

Puppy Raising

Puppy Sitting

Fund Raising

Special Events

Demonstrations and Education

Grooming

Newsletter

Mailings (envelope stuffing)

Graduate Assistants

Assist during team training

Check all skills/ interests that apply:

- Outgoing/Personable
- Positive reinforcement dog training knowledge
- Envelope stuffing
- Arts and Crafts
- Computer fluency
- Work independently
- Detail Oriented
- Neat and Concise
- Organizational skills
- Enjoy setting up and breaking down at special events
- Flexible

Additional Skills: _____

Additional Interests: _____

Expected length of commitment:

Short term (one time to 3 months) Intermediate (6-9 months) Long term

Availability:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Volunteer Experience: Yes No

Please describe any prior volunteer experience:

What are your volunteer expectations?

Do you have access to a car? Yes No

Do you speak any language other than English? If yes, please specify:

List two references with contact information (full name, address, phone number, and relation to you):

1. _____

2. _____

Have you ever been convicted as an adult of any offense against the law including misdemeanors? If yes, please describe:

For positions which involve direct contact with graduates and/or dogs, a background check may be obtained. Is this okay with you? Yes No
List the name and phone number of a person to contact in case of emergency:

Volunteer Signature or Signature of Parent: _____ Date: _____

Are you willing to commit CaPR Volunteer Guidelines: Yes No

--Treat all people and dogs with respect, honesty, and care.

--The mission comes before personal interests.

--Dedication to adding value, learning and growth from my volunteer experience.

Thank you for the time you have taken to carefully fill out this application. Please send a hard copy of this application to:

CaPR

PO Box 460214

Denver, CO 80260

You can expect a follow up call or e-mail within the next couple of weeks.

Sincere thanks,

Mary Kirkham

CaPR Volunteer Coordinator and Graduate

303-399-4575