



Doberman Assistance, Rescue & Education

VOLUNTEER APPLICATION

To begin the application process, please complete ALL of the requested information and mail this form to: darevolunteer@yahoo.com.

Name:

Street Address (including City, State & Zip:

County:

Email:

Home Phone:

Cell or Work Phone:

How did you find out about Doberman Assistance, Rescue & Education? Please provide names if referred by an individual:

How many of the following areas are you interested in for your volunteer efforts?

- | | |
|--|--|
| <input type="checkbox"/> Fostering dogs in your home | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Transports (dogs and donated items) | <input type="checkbox"/> Events participation |
| <input type="checkbox"/> Home visits (for potential adopters) | <input type="checkbox"/> Online Tasks (Website help, Facebook) |
| <input type="checkbox"/> Other (mailings, phone calls) Please specify: | |

Have you ever volunteered for an animal rescue group before? Please choose an option:

- No, this is my first
 Yes, and am still volunteering, List Rescue:
 Yes, and am no longer volunteering, List Rescue:

Have you ever applied to adopt a dog through DAR&E? Please choose an option:

- No, I've never applied to adopt with DAR&E
 No, but I did apply with another rescue, List Rescue:
 Yes, was approved and adopted
 Yes, was approved but didn't adopt
 Yes, and am currently still approved to adopt
 Yes, and was denied

Our adopters sign a contract with us requiring they attend some form of group training class with their newly adopted Doberman in order to facilitate the owner/pet bonding process.

Do you agree with this policy?

- Yes No

DAR&E requires that all pets be kept up to date on vaccines, Heartworm preventative (for dogs), and spayed/neutered (excused only if being actively shown or for a documented medical reason). In order to promote DAR&E's healthcare policy, do your pets meet these requirements?

Yes

No

Please list your current & previous pets (for each, state whether owned as an adult or as a child):

Please provide the name and phone for your vet (required):

DAR&E has an evaluation process for any health or behavior issues that might require euthanasia of a dog. Which one of the following statements on euthanasia matches your personal views?

Euthanasia should never be an option

Euthanasia is only acceptable for health/medical reasons

Euthanasia should be considered only for certain medical or behavioral reasons

Euthanasia should be considered as an option whenever a dog is difficult to rehome

Please provide the names & telephone numbers or email addresses for at least two personal references that DAR&E may contact. Please do NOT list a relative or significant other/boyfriend/girlfriend.

(Good references have usually met your own pets and may include friends, neighbors, coworkers, trainers, breeders, etc.)

Please read the following statement: "**I certify that all the information I've provided in this online volunteer application is accurate and true.**" If you agree with this statement, please answer by selecting "Accept" and if you do not agree, please select "Decline" as your answer.

Accept

Decline

Thank you for taking the time to fill out this application! Please save this document and forward it to the Volunteer Coordinator at darevolunteer@yahoo.com.

Before we can begin processing your application, you will also need to sign and return the DAR&E Code of Ethics form to the Volunteer Coordinator; this form can be found at www.dobe.net/volunteering.

Once both documents have been received by the Volunteer Coordinator, we will schedule a time to go over these forms with you via phone – we look forward to talking with you soon!