**Profile Information:**

|  |  |
| --- | --- |
| Name: | Home Phone: |
| Address: | Cell Phone: |
| City, State, Zip: | Email: |
| Current or previous occupation: |  |
| Over 18 years of age? Yes or No:  | If over 18, birthday (Month and Day):  |
| If under 18, name and email address of parent/guardian: |  |
| Have you applied for a D4D Dog? Yes or No:  |  |

**What motivates you to volunteer at D4D?**

|  |
| --- |
|  |

**What interests you about D4D?**

|  |
| --- |
|  |

**How did you find out about D4D?**

|  |
| --- |
|  |

**Have you attended any D4D events? If yes, which one and when?**

|  |
| --- |
|  |

**Have you ever volunteered for any other organizations? If yes, which one(s)?**

|  |
| --- |
|  |

**What special skills/experience do you wish to share with D4D?**

|  |
| --- |
|  |

**Which volunteer opportunities are of interest to you?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|   | **Training Room Volunteers:** |   |  | **General Support Volunteers** |
|   | Training Room Assistant |   |  | Event Planning/Support |
|   | Dog Grooming |   |  | Graphic Arts |
|   | Dog Walking |   |  | Marketing/Communication |
|   |  |   |  | Outreach/Education |
|   |  |   |  | Social Network Support |
|   |  |   |  | Photography |
|   |  |   |  | Reception/Answering Phones |

***Please note: if you are diabetic and working in the training room with our dogs, the trainer may ask you to test periodically.***

|  |  |
| --- | --- |
| Current Own a Dog? |  |
| Recently Owned a Dog (last 5 years) |  |

**Dog Handling Skills:**

**Please describe any dog handling skills you have:**

**Are there other tasks/activities not listed above that you are interested in doing?**

|  |
| --- |
|  |

**Availability**

|  |  |  |
| --- | --- | --- |
|  | **Morning** | **Afternoon** |
| **Monday** |  |  |
| **Tuesday** |  |  |
| **Wednesday** |  |  |
| **Thursday** |  |  |