

Kindly complete this application form if you would like to volunteer with the **C.S.P.C.A.**

**Personal Details:**

First name

Last name

Address

E-mail Address

Emergency contact details (i.e. next of kin/ family member)  
Name of Emergency Contact Person (Required)

Relation to you?

Telephone Number for Emergency Contact Person (Required)

May we include your information on our database?

Do you hold a driving licence?

Please specify days and times you are available? **Please note you must be able to commit to 8 hours voluntary work per month. e.g. Every Tuesday from 2pm-4pm**

Monday (am)

Monday (pm)

Tuesday (am)

Tuesday (pm)

Wednesday (am)

Wednesday (pm)

Thursday (am)

Thursday (pm)

Friday (am)

Friday (pm)

Please provide us with a brief description of your experience with animals.

**Please provide us with details of two referees.**

Referee 1: Name, Address (Required)

Referee 1: Contact telephone. If employer, company name and position. (Required)

Referee 2: Name, Address (Required)

Referee 2: Contact telephone. If employer, company name and position (Required)

How did you hear about volunteering opportunities with the C.S.P.C.A?

Date of Birth DD/MM/YY (Required)

Contact Mobile / Telephone Number (Required)

The following department is offering opportunities for volunteers. Please circle: (Required)

Volunteer Fundraising. Volunteer Dog Walking. Volunteer Cattery Assistant. Volunteer Office Duties. Volunteer Grounds Maintenance. Volunteer Veterinary Services. Volunteer Website Maintenance.

**Please attach a letter from you doctor confirming you have a current Tetnis Vaccination. Please enclose a photocopy of your current drivers licence/passport and a signed C.S.P.C.A insurance waiver form.**

Thank you for completing our online application form. Kindly submit it to the C.S.P.C.A, Link Road, Mahon, Cork.