



Oasis

Animal Rescue and Education Center

86 Simcoe Street North,
Oshawa, ON L1G 4S2
Phone: 905-728-8500
Fax: 905-728-8503
info@oasisanimalrescue.ca
http://www.oasisanimalrescue.ca

OASIS Prospective Volunteer Form

Nonprofit organizations need to be careful about who they allow to volunteer for them. There are many horror stories about inadequately vetted volunteers causing harm to a nonprofit's clients. An adequate volunteer application form is essential. An organization can be held responsible for illegal acts of volunteers unless there are sufficient safeguards and paperwork in place. Umbrella insurance policies protect nonprofits, but only if they properly vet and document volunteer workers.

Personal Information

Full Name: _____
(first, initials, surname)

Home Phone #: _____

Home Address: _____
(apartment/unit #)

Mobile Phone #: _____

_____ (street)

Email Address: _____

_____ (city, province, postal code)

Student? ☐ Senior? ☐ Retired? ☐

Employer: _____

Work Phone #: _____

May we call you at work? Yes ☐ No ☐

Briefly describe your work: _____

Emergency Contact: _____
(first, initials, surname)

Relationship: _____

Address: _____

Phone #: _____

Computer skills (ie. Windows/Mac, Quark Xpress, Pagemaker, Office, Outlook, HTML): _____

Do you have hands-on experience in advertising sales, telemarketing or graphic design? Yes ☐ No ☐

What languages do you speak? _____

Do you drive? Yes ☐ No ☐

Do you have regular access to a car? Yes ☐ No ☐

Current community activities: _____

List current and previous volunteer work: _____

What are your reasons for wanting to participate as an OASIS volunteer? _____

Do you have pets? Yes ☐ No ☐

If yes, what species? _____

Do you have a preferred area to volunteer in? _____

How did you hear about us? _____

When are you available through the week? S ☐ M ☐ T ☐ W ☐ T ☐ F ☐ S ☐

Morn ☐ Aft ☐ Eve ☐

Hours available? _____

Please Note

- I understand that OASIS has my permission to use my name and photographs of me to promote the organization.
- I understand I may not initiate or engage in any media/public event pertaining to the organization without the approval of OASIS.
- Requests for media engagements will be referred directly to the OASIS Staff.
- I understand that I have the right to submit a grievance to the Executive Director of OASIS should I not be satisfied with the response to the needs of, the interaction with, or care for animals within the scope of the OASIS mission.

Signature: _____

Date: _____
(day/month/year)