

## Little Apple Veterinary Hospital

## Application for Volunteers and Interns

Today's Date:

Personal Information			
Name:			
Address:	City:	State:	Zip:
Home Phone:	Work Phone:		1
Cell Phone:	Email:		
Why are you interested in voluntee	ering? Personal interest	] Educational In	ternship
Community Service Hours	_ =		1
Ageover 16	 under 16		
Have you ever worked or do you o	currently work for the Little Ap	ople Veterinary I	Hospital?
Have you ever received services fr	om the Little Apple Veterinary	Hospital?	•
Do you have a valid driver's licens		1	
Experience and Education			
What is your educational/training	background?		
What is your employment history?			
Have you had any previous experio	ence as a volunteer? If so, with	what organizati	ons, and what kind
of work did you do?			
Do you have any previous experies	nce working with animals or w	orking at a veter	rinary hospital?
What did you do?			
Your Interests at the Little			_
How did you learn about us? $\square A$		· —	Employee
Current Volunteer Other	Please specify		
Which opportunities do you wish	to further explore:		
What dates do you plan on commi	itting to volunteering:		

What days are you available?  Mondays Tuesdays Wednesdays Thursdays Fridays Saturdays Sundays
What times are you available?  Mornings  Afternoons  Evenings
Do you prefer to work (check all that apply) Directly with people served Behind the scenes Computers Maintenance No preference
Hobbies/interests:
Skills you would like to use while volunteering:
Other languages you speak Basic Conversational Fluent Basic Conversational Fluent
Do you have any special needs or restrictions we should be aware of?:
Date you can begin service:
Criminal History
All volunteer positions may require a Criminal History check. Conviction will not necessarily disqualify you from participating. Have you ever been convicted of a felony?   Yes No If yes, explain.
disqualify you from participating. Have you ever been convicted of a felony? Yes No If yes, explain.
disqualify you from participating. Have you ever been convicted of a felony?   Yes   No
disqualify you from participating. Have you ever been convicted of a felony? Yes No If yes, explain.  Please describe in 3-5 sentences why you want to be a volunteer or intern at the Little Apple Veterinary Hospital.  Why, at this particular time in your life have you chosen to volunteer with us? What do you hope to
disqualify you from participating. Have you ever been convicted of a felony? Yes No If yes, explain.  Please describe in 3-5 sentences why you want to be a volunteer or intern at the Little Apple Veterinary Hospital.  Why, at this particular time in your life have you chosen to volunteer with us? What do you hope to
disqualify you from participating. Have you ever been convicted of a felony? Yes No If yes, explain.  Please describe in 3-5 sentences why you want to be a volunteer or intern at the Little Apple Veterinary Hospital.  Why, at this particular time in your life have you chosen to volunteer with us? What do you hope to

References			
List name and telephone number applicable, list three school or positive applicable.			ated to. If not
Name	Title	Telephone #	Years known

The Little Apple Veterinary Hospital considers applicants for internships/volunteering without regard to sex, race, age, religion, national origin, veteran or marital status, or any other legally protected status. We provide reasonable accommodation to qualified individuals with disabilities when it would not be an undue hardship. If you need a reasonable accommodation in the pre-placement process, please contact the Volunteer Manager.

AUTHORIZATION AND AGREEMENT BY APPLICANT					
I certify that the facts set for in this volunteer application are true and that any false statement, omission or misrepresentation in my application or my application or discharge from the volunteer program.					
Signature of Applicant	Date				

Note to all volunteers: Volunteers need to observe the dress code for the LAVH.

<u>Dress Code:</u> As a professional business, we expect everyone to have a well-groomed personal appearance. No apparel, personal grooming or hygiene practices should distract others or create a safety hazard to you or coworkers. Should an employee stray from the dress code, they will be sent home to change, on their own time.

## All Hospital team members:

Are to comply with the grooming/dress code

Are to keep uniforms clean and pressed

No one is to wear a personal pager, beeper, cellular phone, headphones or ear buds

No sandals, blue jeans, tank tops, t-shirts or sweatshirts

(except those with holiday or veterinary designs), sweatpants, shorts, frayed worn-out looking clothing or shoes with holes. Scrubs, grooming pants, polos and khakis (blue, black, tan, olive, etc) are considered appropriate.

Hair neat, clean and conservative at all times, no radical styles or colors

Shoes: clean, neat, no holes, comfortable for highly active work, no open toed shoes.

No visible tattoos

Those taking radiographs are to wear lead gloves and lead aprons.

## Women:

Hair accessories moderate to conservative

Fingernails no more than a quarter inch beyond finger, polish clear or moderate in color

Conservative jewelry limited to a watch and no more than two rings per hand, no dangling jewelry

No visible body piercings, (including tongues), except for ears

Men: Hair no longer than collar length

Facial hair limited to a neatly trimmed mustache and/or beard

Side burns to mid-ear only

No earrings. No visible body piercings, including tongues

Jewelry limited to one ring per hand, a watch and a tie tack or clasp

**Smoking:** Smoking is prohibited on the entire property of the LAVH.

**Cell Phones:** Please shut off/silence all cell phones before entering the building.