



Fidos For Freedom, Inc.
1200 Sandy Spring Road
Laurel, MD 20707
301.490.4005 (voice)
301.490.9061 (fax)
office@fidosforfreedom.org

VOLUNTEER APPLICATION

Date of Application: _____

Applications may be submitted in four ways:

- Mail
- Drop off during office hours
- Fax it to 301-490-9061
- Email to office@fidosforfreedom.org

Name: _____

Address: _____
Number Street Apt. No.

City/Town State Zip Code

Home #: _____ Cell #: _____

Email: _____

Emergency Contact Name: _____ Number: _____

Please list/describe your 3 most recent work/volunteer experiences:

	<i>Organization</i>	<i>Position/Experience</i>	<i>Dates of Service</i>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

I am interested in the following program(s):

☐ **Therapy Dog Program**

Consists of pet dogs owned by our volunteers and are specifically trained to perform quality pet therapy visits at local healthcare facilities. Therapy dogs also participate in our community education programs. All dogs must be tested prior to being accepted into the TD Program. Testing is done twice a year.

☐ **Dogless Handler**

For those people who don't have dogs but wish to volunteer in some therapy dog capacity.

☐ **Puppy Raiser**

This is a yearlong commitment that requires a puppy raiser to provide a stable, loving and safe environment in addition to teaching the puppy basic obedience in accordance with the Fidos Assistance Dog Training Program.

☐ **Assistance Dog Trainer**

Responsibilities include housing and training a hearing or service dog team that is confident and well-prepared to meet the challenges of daily living safely, and that can maintain and expand the level of expertise that is expected of a Fidos For Freedom assistance dog team; attending weekly training classes, monthly training meetings and public outings. Work with clients.

Please tell us why you are interested in becoming a trainer.

Please discuss your experience in training or animal interactions or any animal training:

☐ **Vacation Home Provider for Puppies and Assistance Dogs in Training**

Volunteers provide a temporary home for puppies and Assistance Dogs in training while their trainer/handler is away.

☐ **Social Media / Outreach / Community Education**

☐ **Fundraiser / Grant Writer**

☐ **Other** _____

Number of Hours Available to Volunteer Each Week:

☐ 1-5 ☐ 5-10 ☐ 10-15 ☐ 15-20

Please list the time frames you are available to volunteer:

☐ Monday: Start _____ End _____; ☐ Tuesday: Start _____ End: _____
☐ Wednesday: Start _____ End _____; ☐ Thursday: Start _____ End: _____
☐ Friday: Start _____ End _____; ☐ Saturday: Start _____ End: _____

Do you own a dog(s)? ☐ Yes ☐ No If yes, the name of the dog: _____

Breed: _____ **Age:** _____

Type of obedience training: _____

Have you ever owned a dog? ☐ Yes ☐ No

If yes, breed of dog: _____

Type of obedience training: _____

Please discuss your experience with dogs and dog training:

Why are you interested in volunteering for Fidos For Freedom?

Signature of Applicant

Date

Thank you for taking the time to complete this application. Once received, a Fidos representative will contact you as soon as possible. Please keep in mind that we are a mostly volunteer-run organization. So, please allow sufficient time for your application to be processed. We look forward to working with you and sincerely appreciate your offer of time and skills. Fidos For Freedom could not exist without our volunteers. If you have questions, please call our office or send an email to office@fidosforfreedom.org.