



FOR OFFICE USE ONLY

VOLUNTEER #: _____
Orientation: _____



Saratoga County Animal Response Team Volunteer Application

GENERAL INFORMATION (PLEASE PRINT CLEARLY)

Name:		Are you 18 or older?		
Street Address:				
City:		County:	State:	Zip Code:
Home Phone:	Day Phone:		Mobile Phone:	
Email Address:			Pager:	
Do you have any allergies/conditions that might affect your volunteer work? If Yes, Please Describe:				

EMERGENCY CONTACT

Name:			
Street Address:			
City:		State:	Zip Code:
Home Phone:	Day Phone:		Mobile Phone:

EMPLOYER INFORMATION

Employer(s) Name:			
Street Address:			
City:		State:	Zip Code:
Contact Name/Position:			
Phone Number:	Position held:		

WILLING TO RESPOND TO INCIDENTS:

COUNTY: _____ YES _____ NO
REGIONAL: _____ YES _____ NO
STATE: _____ YES _____ NO

EQUIPMENT/FACILITIES AVAILABLE:

EQUIPMENT, SUPPLIES OR FACILITIES YOU WOULD LIKE TO DONATE THE USE OF FOR DISASTER RESPONSE OR SART TRAINING. PLEASE LIST:

HAVE YOU COMPLETED ANY OF THE FOLLOWING REQUIRED FREE TRAINING?

Incident Command System 100.b	YES _____	NO _____
National Incident Management System 700.a	YES _____	NO _____
HAZMAT Awareness	YES _____	NO _____

Veterinarian, _____ yrs	Fire Fighter/HAZMAT, _____ yrs	Farm/Stable experience, _____ yrs
Veterinary Technician, _____ yrs	Law Enforcement, _____ yrs	Zoo (animal care) experience, _____ yrs
Veterinary Assistant, _____ yrs	Humane Investigator, _____ yrs	Remote Chemical Capture, _____ yrs
Euthanasia Technician, _____ yrs	Animal Control Officer, _____ yrs	Counseling experience, _____ yrs
Emergency Medical Technician, _____ yrs	Dog Control Officer, _____ yrs	Military, _____ yrs
RN/LPN/PA, _____ yrs	Shelter/Kennel Attendant, _____ yrs	Boating experience, _____ yrs
Boarding Kennel Operator, _____ yrs	Pet Groomer, _____ yrs	Truck & Trailer driving, _____ yrs
Disaster Response, _____ yrs	Wildlife Rehabilitator, _____ yrs	Heavy Equipment Operator, _____ yrs
Animal Shelter E.D./D.O., _____ yrs	Donations Management, _____ yrs	Marketing/Fundraising, _____ yrs
Non-Profit/Charity work _____ yrs	Animal Behaviorist, _____ yrs	Public Speaker/Media, _____ yrs
Teacher _____ yrs Of: _____	Animal Husbandry, _____ yrs	CERT/Red Cross, _____ yrs
Administration/Clerical _____ yrs	Web Design, _____ yrs	Communications/IT, _____ yrs

Other _____, _____ yrs

Other _____, _____ yrs

PLACEMENT

Please circle the activities that interest you.

Small Animal Handling/Rescue/Recovery	Large Animal Handling/Rescue/Recovery
Sheltering/Foster Care	Triage/Veterinary Services/Mortality Management
Health/Safety	Counseling
Administration/Records/Time Unit	Information Technology/Communications
Finance/Accounts	Donations/Supply Management
Resource Procurement	Public Outreach/Education

Have you been convicted of a crime within the last 7 years? Yes No
(Conviction will not necessarily disqualify applicant from becoming a CART volunteer.)

If yes, please explain: _____

Are you willing to allow us to do a background check? Yes No

Do you understand that certain training is mandatory for volunteers? Yes No

(This training is provided free of charge.)

Required Training

- **County Animal Response Team** - online at <http://www.ualbanyphp.org/learning/default.cfm>
- **Incident Command System 100.b** - online at <http://training.fema.gov/EMIWeb/IS/is100b.asp>
- **National Incident Management System 700** – online at <http://training.fema.gov/emiweb/is/is700a.asp>
- **Hazmat Awareness** – online at http://www.saferesponse.com/sub_page/hazmat_main.htm
- **Code of Conduct** - online at <http://www.empiresart.com/pdfs/Code%20of%20Conduct.pdf>

Suggested Additional Training

- **Livestock in Disasters** - online at <http://training.fema.gov/is/courseoverview.aspx?code=is-111.a>
- **Animals in Disasters: Awareness and Preparedness** - online at <http://www.training.fema.gov/is/courseoverview.aspx?code=IS-10.a>
- **Animals in Disasters: Community Planning** - <http://www.training.fema.gov/is/courseoverview.aspx?code=IS-11.a>

CERTIFICATION

I hereby affirm that my answers to the foregoing questions are true and correct and that I have not knowingly withheld any facts or circumstances which would, if disclosed, affect my application unfavorably. I understand that any false statements, representations or failure to disclose pertinent information will be considered sufficient cause for disqualification from consideration for volunteer service or immediate discharge. I understand also, that I am required to abide by all rules and regulations of the Saratoga County Animal Rescue Team (SCART).

I understand and agree that my position in SCART is entirely voluntary and without compensation. I further understand that nothing contained in this volunteer application or in the granting of an interview is intended to create an expressed or implied volunteer contract between the SCART and myself. No promises regarding volunteer work or any duration of volunteer service have been made to me and I understand that no such promise is binding on the SCART unless made in writing. I further understand and agree that if I am offered and accept a volunteer position in SCART, my volunteering can be terminated with or without cause, and with or without notice, at any time, at the option of the SCART.

I understand and agree that my volunteer position is contingent upon, among other things, my signing the SCART Volunteer Agreement and Code of Conduct; ***I understand there are base-level training requirements established by SCART that I must successfully complete.***

I hereby certify that I have read the foregoing material and understand the contents thereof.

Applicant's Signature:

Date:

**MAIL TO: SARATOGA COUNTY ANIMAL RESPONSE TEAM
C/O SARATOGA COUNTY ANIMAL SHELTER
6010 COUNTY FARM ROAD
BALLSTON SPA, NY 12020
ATTENTION: DEB SHELDON**

FOR MORE INFORMATION ABOUT THE STATE ANIMAL RESPONSE TEAM, ESART, GO TO WWW.EMPIRESART.COM