

**Volunteer Application**  
Paws of Chico Spay & Neuter Program  
P.O. Box 93, Chico, CA 95927-0093  
530-895-2109



Date: \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Are you a pet owner and if so what kind of animals do you live with?

\_\_\_\_\_  
\_\_\_\_\_

Do you have computer skills? \_\_\_\_\_ Do you have a home computer? \_\_\_\_\_ PC or Mac

Please circle what you are familiar with: internet excel word publisher power point

Are you available for our monthly meeting the last Monday of the month from  
6:00 – 8:00 P.M.? \_\_\_\_\_

Do you have transportation? \_\_\_\_\_

Are you available on occasional weekends? \_\_\_\_\_ Do you work full time? \_\_\_\_\_

Are you available during the week? \_\_\_\_\_ Do you attend school? \_\_\_\_\_

What kind of volunteer or work experience do you have?

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