



Monmouth County Animal Response Team  
Volunteer Application

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email Address: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_  
Phone Numbers (please indicate which number(s) to call first with an asterisk\*):  
Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  
Fax: \_\_\_\_\_ Pager: \_\_\_\_\_  
Organization & Title (if applicable): \_\_\_\_\_

1. I am interested in volunteering for (check all that apply):

**Emergency Planning:**

Identification of Resource locations  Volunteer recruitment  CART plan & template design/update  Identification and implementation of Training Opportunities and locations

**Emergency Response:** Participation in:

Search & rescue  Medical assistance/triage  Shelter maintenance  Transportation/hauling  
 Communications (please specify, ie: CB radio, shortwave, computer-based) \_\_\_\_\_  
 Telephone hotline

**Administration & Public Relations**

Recording (secretarial)  Promotional events  Website updates  Mailings

**Resource Donation**

Equipment & supplies: Please specify types and amounts: \_\_\_\_\_  
Shelter space: Please specify type/size/species: \_\_\_\_\_  
Storage space (equipment & supplies) Please specify size/type: \_\_\_\_\_  
Monetary donation \_\_\_\_\_

2a. **I have experience with** (check all that apply):

Cats  Dogs  Sheep  Swine  Equine  Reptiles  Birds  Wildlife  Zoo animals  Other:

Description of background and animal related skills:

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

2b. I am a:

Veterinarian License Number: \_\_\_\_\_

Veterinary Technician

Professional trainer: Species: \_\_\_\_\_

3. I have applicable training in areas such as emergency response or animal related training (list training or attach separate list of training background):

Training Course	Date of Course	Training Provider

4. I speak another language: Please specify: \_\_\_\_\_

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