

ALL VOLUNTEERS MUST BE RELIABLE AND COMMIT TO AT LEAST ONE SHIFT PER WEEK.



SS19

Volunteer Application

Please complete the whole form and print neatly. Date _____

<u>Name</u>	<u>Birth Date</u>
<u>Address (1st and 2nd Line)</u>	<u>City, County and Eircode</u>
<u>Email Address</u>	<u>Home Phone</u>
<u>Mobile Phone</u>	<u>Occupation</u>
<u>What volunteer position are you applying for?</u>	<u>Are you Garda vetted? (ALL applicants MUST be)</u>

Please tick the blanks under the days you are available, with the times you will be available.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
MORNING							
EVENING							

MORNING SHIFT 9AM-11.30AM AND EVENING SHIFT 5.30PM – 8PM

(Chat to us if you need to be more flexible and we will try to make an arrangement).

Please note times can change slightly from summer to winter, either later or earlier)

If you are applying for the following positions, please leave above section blank: Welfare Officer/Education Officer.

The following questions are for the safety of our volunteers and animals, this information will remain confidential: Please be open and honest.

(1) Have you ever been convicted of an offence? Yes _____ No _____

If you selected Yes, please explain.

(2) Have you any illness or or medication? Yes _____ No _____

If you selected Yes, please explain.

(3) Have you ever been convicted of animal cruelty or neglect? Yes _____ No _____

If you have selected Yes, please explain.

(4) Are you pregnant? Yes _____ No _____

If you have selected Yes, please state how far you are gone

RETURN FORMS TO: Leinster Horse and Pony Rescue, HR Department, Kilttoome, Navan Road, Trim, County Meath

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PLEASE ANSWER WITH YES OR NO TO THE FOLLOWING QUESTIONS

Are you able to assist us with transporting equines?	Have you a horsebox or horse lorry?
Are you able to tow an LHPR horsebox if needed?	From time to time our volunteers are called upon by our welfare officers on the frontline – this is not for everyone as scenes can be upsetting and often tense. Are you willing to help us help animals in their darkest hours?
Have you any stables or land you would allow L.H.P.R. to use in the event of an emergency or urgent welfare case?	If your answer is yes to owning stables, please state the location of them.
Any other notes or information you feel is important to your volunteer application?	

Please provide contact details for one person who we may contact for a reference

Name: Phone Number:

Address:

Context in which you know this person:



GDPR Contact Opt-In (Please circle the method in which you wish for us to communicate with you)

Phone / SMS / Email / Post / Decline

Data Protection Statement

Leinster Horse and Pony Rescue will process your personal data for the purposes of achieving the stated objectives of rescuing, rehabilitating and re-homing equines in need and any associated fundraising activities to provide for their care. It is our policy not to transfer your data to any other organisations or third party*.

LHPR uses a secure online system designed specially, for animal rescue groups and animal control agencies. This online system stores all its information on servers that are hosted in an ISO 27001 certified data centre in London to comply with GDPR requirements. **Information is held for the duration of volunteering, it is then destroyed.**

* From time to time Leinster Horse and Pony Rescue may disclose information to third parties such as the Department of Agriculture Food and Marine, The Gardai and Local Government (City and county councils). **This will only be done upon them submitting a request to us.**

Please complete the following questions about yourself and your experience with horses:

How many years of experience do you have? **(Fill in the blank with number of years)**

Leading horses _____ Grooming horses _____ Providing basic hoof care/cleaning _____

Training horses with ground work _____ Starting a horse under saddle _____

Riding well trained horses _____ Riding "green" broke horses _____ Mucking Out _____

Providing medical assistance to horses _____ Full care and/or maintenance of a horse _____

Working with an average size horse _____ Working with a young horse (*less than 1 yr.*) _____

Please describe your horse experience, based on the year of experience that you have marked above:

Please describe any other experiences or talents that you would like to let us know about:

****Don't worry, extra training is available for our volunteers! ****

Please provide the following emergency information:

Emergency Contact Name / Relation to them/you Home Phone

Mobile Phone Work Phone

Do you have any medical limitations or are you on any prescription medications? Yes _____ No _____
If Yes, please describe your conditions and alert us to how to help you in an emergency situation:

LHPR accepts no liability for any injury, loss or even death, while volunteering with us or volunteering on your own, on behalf of LHPR. Our work involves working with animals & people of a very unpredictable nature. Volunteers accept that they work with animals at their own risk, asking all necessary questions and seeking guidance in how to approach each situation as it arises. By signing below, you agree to all of the above.

Signature:

Date

Parent / Guardian Signature (If Under 18 yrs.)

Date

Accepted by the office? Official signature:

Date