

**Professor Paws Teaching Volunteer Information** 

Date of Application:/		_/			
Name: Miss/Ms./Mrs./Mr.					
First					
Address:					
District:				Birth Date:	/ / dd mm yy
Home Phone:				Work Phone	2:
Email:				Mobile:	
Emergency Name:				Emergency	Phone:
Are you currently employed?			No		
How did you hear about us?	🗆 Volu	nteer Cen	ter	🗆 Brochure	🗆 Internet/Website
	□ TV	🗆 Newspo	aper	🗆 Events	Friend/Family
	Other.				

## Availability

Volunteers must be available for visits on weekdays. Visits are to schools across Hong Kong. Each lesson lasts one hour, however, allowing for additional travelling time, volunteers need to allow approximately 3 hours for each visit.

Yes

🗆 No

Morning	Mon	Tue	Wed	Thur	Fri □		
Afternoon							
Flexible							
Native English Speaker or Fluent in English:							No
Do you enjoy			No				

Do you enjoy working with dogs/animals?