UPMC Children's Hospital of Pittsburgh: Pet Friend Program Interest Form

Owner's Name:Phone Number:			
Email:			
Dog's Name:	Dog's Breed:	Sex:	Age:
Thank you for your interest in the Pet Frier program is very popular and brings smiles forms for our Wait List.		•	
Steps to becoming a Pet Friends Voluntee	r at UPMC Children's Hospita	l of Pittsburgh:	
 Canine on-site evaluation If on-site evaluation is passed: Volunteer will attend requ Volunteer and dog will sha After shadow and guided visit, volunteer 	by veterinarian and signed by on (link provided by Volunteer and be accepted as a volunteen nentation (Clearances, Immunitied Volunteer Orientation adow veteran handler and/or punteers will be added to Pet Frunteers w	y handler) Services department) er izations & Paperwork) participate in guided first	
Requirements for your dog to be evaluate	ed:		
evaluation.	emper/Parvovirus vaccinations ms are negative. Proof must b certification program such as b es Pet Company, Therapy Dog	s are current. Proof must e submitted prior to evalu out not limited to Therapy	be submitted prior to uation. Dogs International,
We required that all Pet Friends volunteer, 3 rd Monday of each month from 10 am to loospital or the day of the hospital visit.			, •
What made you interested in the Pet Frie	nds Program at UPMC Childre	n's Hospital of Pittsburgl	1?

Updated July 2022

Date Received:

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Share a little information about your dog and his/her temperament.
Please detail the training your dog has received including content, name of program, certifications, etc.
Please provide any relevant information you would like to share about your dog.