



Meadowlands Area YMCA

Rev. 3-29-11

2011

Volunteer Application

Availability: _____

**** Notice to Volunteer Applicants ****
The YMCA maintains a "zero tolerance" for child abuse and/or substance abuse.

Circle all that apply:

Office

Childcare

Enrichment Classes

Criminal background check and other federal or state screenings for child abuse will be conducted.

Senior Classes

Aquatics

Special Events

Please type or print. Application must be completely filled out in order to be considered.

Personal Data

Name _____

Home Phone _____

Address _____

Cell Phone _____

City _____ State _____ Zip _____

Email Address _____

Previous residence (Address, City, State, Zip): _____

Previous residence (Address, City, State, Zip): _____

Previous residence (Address, City, State, Zip): _____

• Have you previously worked/volunteered for any YMCA? Yes No If yes, when _____
YMCA Name & Address _____

• Are you 18 years of age or older? Yes No

• Do you have any pending charges or have you ever pled guilty or been convicted of a crime, felony, disorderly persons offense, drunk driving offense or other violation of law? Do not include convictions that have been annulled, expunged or sealed by a court?
 No Yes, detail _____

• Offenses against persons or family, or public indecency?
 No Yes, detail _____

Answering "yes" to these questions does not constitute an automatic bar to volunteering but will be considered.

Availability

What type of position are you applying for: Full time Regular Part-time Seasonal Other

When are you available (check all that apply)? Available start date? _____

Mornings Days Evenings Late Evenings Weekends

Any restrictions to volunteer hours? _____

Is there any special paperwork we will be required to fill out? _____ Explain: _____

Employment & Volunteer History

Provide the following information of your past and current employers or assignments, **starting with the most recent** (use additional sheets if necessary).

Employer _____ Telephone _____ () Address _____	Dates Employed From _____ To _____	Summarize the type of work performed and job responsibilities
Starting job title/Final job title _____	Hourly Rates/Salary Starting	_____
Immediate supervisor and title _____	\$ _____ per	_____
Reason for leaving _____	Hourly Rates/Salary Final	_____
_____	\$ _____ per	_____
Employer _____ Telephone _____ () Address _____	Dates Employed From _____ To _____	Summarize the type of work performed and job responsibilities
Starting job title/Final job title _____	Hourly Rates/Salary Starting	_____
Immediate supervisor and title _____	\$ _____ per	_____
Reason for leaving _____	Hourly Rates/Salary Final	_____
_____	\$ _____ per	_____
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Immediate supervisor and title _____	\$ _____ per	_____
Reason for leaving _____	Hourly Rates/Salary Final	_____
_____	\$ _____ per	_____

Non-employment Record

Include explanation of all lapses in employment on preceding page.

From		To		Reason
Mo.	Yr.	Mo.	Yr.	
Mo.	Yr.	Mo.	Yr.	
Mo.	Yr.	Mo.	Yr.	
Mo.	Yr.	Mo.	Yr.	
Mo.	Yr.	Mo.	Yr.	

Education

School Name & Address (high school, college, trade)	Major Course or Degree Program	Diploma/Degree Received

References

List at least four references/persons that know you well and can attest to your abilities and suitability for YMCA employment (*one reference must be a family member*). (If under 18, include pastor, guidance counselor, teacher, or coach)

Name	Phone Number	Relationship to you	Years Known
1.			
2.			
3.			
4.			

Additional Information

Do you hold current CPR certification? Yes No

Expiration: _____

Do you hold current first aid certification? Yes No

Expiration: _____

Do you hold current lifeguarding certification? Yes No

Expiration: _____

Other relevant certifications held:

Type: _____ Expiration: _____

Type: _____ Expiration: _____

How did you find us? (if applicable)

- Walk-in
- Signs at Center
- Web Page
- Referral
- Advertisement
- Relative
- Employee
- Private Employment Agency
- Other _____

Applicant Statement

I certify that all information I have provided in order to secure Volunteer work with the YMCA is true, complete and correct, and I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the YMCA's service, whenever it is discovered.

Initial _____

I expressly authorize, without reservation, the YMCA, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the YMCA, its agents, employees or representatives, for seeking, gathering and using such information in the acceptance process and all other persons, corporations, organizations for furnishing such information about me. I am aware that I have the right to make a written request for disclosure of the nature and scope of any report that may be ordered.

Initial _____

I understand on acceptance as a volunteer, the YMCA will conduct a criminal background check prior to and during my volunteering as well as a child abuse registry check and I am subject to random, accident follow-up, and for cause drug testing, as well as post offer drug screening.

Initial _____

I am not a child molester, abuser or pedophile; and have not been accused of being a molester or abuser.

Initial _____

I understand that the YMCA does not discriminate in on the basis of race, color, veteran's status, religious creed, national origin, sex, ancestry, or age; or on the basis of a handicap not limiting the applicant's ability to perform satisfactorily the job available. The YMCA will give this application every reasonable consideration.

Initial _____

I understand that this application remains current for only 60 days. At the conclusion of that time, if I have not heard from the YMCA and still wish to be considered for volunteering, it may be necessary to reapply and fill out a new application.

Initial _____

STATEMENT ON ABUSE PREVENTION POLICY

This is a policy that we explain to each and every one of our candidates. The YMCA knows that, unfortunately, there may be people who want to volunteer here for the wrong reasons. But we are sure you'll be pleased to hear about the active and, we believe, effective effort we make to prevent sexual and physical abuse. First, we attempt to screen out offenders whenever possible; for example, we do a very thorough background check, including criminal history.

Second, we structure the program so that one staff member or volunteer is never left alone with one child or anyone else that is vulnerable. We try to prevent any opportunity for abuse, and we periodically interview children and others about their experiences in the program.

Third, we take any and all allegations, including those from children, very seriously. We refer all allegations to the authorities for investigation, and we cooperate fully with any investigation. Wrongdoers need to know that this is a very risky place to attempt to abuse children or anyone who is vulnerable. Most everyone appreciates this thorough process, which not only protects the people in our care, but also minimizes the potential for false accusations of abuse against innocent staff members and volunteers. I have read and understand the Statement of Abuse Prevention Policy.

Initial _____

I understand that if I am hired, I will be required to provide proof of identity and legal authority to volunteer in the United States and that federal immigration laws require me to complete an I-9 Form in this regard, and

I certify that I have read, fully understand and accept all terms of the foregoing applicant statement.

Do not sign until you have read and initialed the above statements!

Signature of Applicant

Date

While a volunteer you will be bound by our Code of Conduct:

1. In order to protect YMCA employees, volunteers and program participants, at no time during a YMCA Program may an employee and/or volunteer be alone with a single child where he or she cannot be observed by others. As employees and/or volunteers supervise children, they should space themselves in such a way that other employees and volunteers can see them.
2. Employees and/or volunteers shall never leave a child unsupervised.
3. Employees and/or volunteers will make sure the restroom is not occupied by suspicious or unknown individuals before allowing children to use the facilities. Employees and/or volunteers will stand in the doorway of the restroom while children are using the restroom. This policy allows privacy for the children and protection for the employee and/or volunteer (not being alone with the child). If employees and/or volunteers are assisting younger children, doors to the facility must remain open. No child, regardless of age, should ever enter a bathroom alone on a field trip. Always send children in threes, and whenever possible, with employees and/or volunteers.
4. Employees and/or volunteers should conduct or supervise private activities in pairs - diapering, putting on of bathing suits, taking showers, etc. When this is not feasible, employees and/or volunteers should be positioned so that they are visible to others.

RELEASE AND AUTHORIZATION FOR BACKGROUND CHECK

I consent to have a consumer report made as to my credit history, employment history, educational experience and related qualifications, motor vehicle driving record, social security information, criminal record, and other pertinent information for employment and/or volunteer purposes, including initial hiring decisions, promotions, reassignments, and/or retention. I hereby authorize Meadowlands Area YMCA to obtain a background report containing the foregoing information.

I am aware that the background report I consent to have prepared may include information obtained from a variety of sources, including but not limited to government agencies, national credit reporting agencies, and others. I am aware that if I choose, I may obtain a complete disclosure of the nature and scope of any report prepared about me if I make a written request within a reasonable time after I execute this authorization.

I also authorize and request every person, firm, company, corporation, governmental agency, court, law enforcement office, and any other entity having control or possession of any information pertaining to me or my background to furnish same to any requesting party.

By this Authorization for Release of Information and for the Procurement of a Background Report, I hereby forever release, discharge, exonerate, hold harmless and indemnify the Meadowlands Area YMCA and the agencies that provide the background report, their affiliates, employees, directors, officers, representatives, agents, and subcontractors, and any other person, entity, organization or institution furnishing information to them from any and all liabilities of every nature and kind, including but not limited to claims for libel, slander, invasion of privacy, related tort claims, misuse of information obtained, and any other claim or cause of action arising out of the furnishing, inspection or copying of any documents, files, records, and other information, or the investigation, unless such release is determined to violate the public policy of the state or federal district in which this contract is executed, and in that event this release will be permitted to the maximum extent allowed by the governing law.

I understand that a photocopy or facsimile of this signed document shall be considered as valid as an original.

IMPORTANT! SATISFACTORY TO CONTACT PRESENT EMPLOYER? YES ___ NO ___

Printed Name: _____

Address: _____
Street City State Zip

Social Security No. _____ * Birthdate: _____ *

Drivers License No. _____ State Issued: _____
(Photocopy of Driver's License must be included.)

*Responses to these questions are completely voluntary. You need not respond to have your application considered. However, without this information, we may be unable to distinguish you from another person in the event we discover adverse information during our background investigation.

signature

date

FOR VOLUNTEERS UNDER THE AGE OF 18 A PARENT/GUARDIAN MUST SIGN:

I, _____ (print), acknowledge that my child, _____ (print), will be volunteering at the Meadowlands YMCA .

THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any, loss, liability, damage or cost they may, incur due to the presence of the undersigned or such children in, upon or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releasees or otherwise.

PARENT SIGNATURE

DATE