



INDIANA COUNTY YMCA VOLUNTEER APPLICATION

Thank you for considering the YMCA as a place to donate your time and talents. Volunteers are vital to the YMCA. Without them, we wouldn't be able to meet the needs of the kids, families, and adults who live in Indiana County.

At the YMCA, we know that your time and talent are precious, and we want every minute you spend with us to be worthwhile. That's why we're asking you to take a few minutes to fill out this application. It will help us begin to make the right match between your skills and interests and the opportunities available.

You will find questions on this form about your background, former residences, places of employment, and so on. We hope you'll understand that, unfortunately, there are a few people who apply for volunteer jobs at the YMCA for the wrong reasons. The YMCA, however, makes an active effort to prevent abuse. So even though we may know you well, we reserve the right to conduct background and reference checks on all volunteers. It's just one of the many ways we help protect children and other vulnerable people served by the YMCA.

Attached to this application is also a form to fill out to receive your Child Abuse Background Check and directions to get your State Police Background Check. You must send for these to volunteer. Each will cost \$10.00.

Thanks for your cooperation in this effort and your interest in the YMCA. If you have any questions about this or any part of our application process, please contact

Shawn Sebring
Senior Program Director
(724) 463-9622
shawnsebring@icymca.org

Thank you for wanting to benefit the YMCA. Someone will be getting back with you shortly regarding your application.

Sincerely,

YMCA Management

Today's Date _____ (Month/Day/Year)

Mr. Mrs. Miss Ms. Rev. Dr. Other

Name _____
(Last) (First) (Middle)

Address _____

City _____ State _____ Zip _____

Phone: Day _____ Evening _____

How long have you been at this address? _____

If you are a college student, what is your major(s)? _____

Social Security Number _____ - _____ - _____

Are you 18 years of age or over? Yes No (If no, please have your parent or guardian sign the application, too.)

Emergency Contact

Name _____

Address _____

City _____ State _____ Zip _____

Phone: Day _____ Evening _____

Interests

How did you learn about volunteer opportunities at the YMCA?

Why would you like to volunteer?

Have you heard about any particular volunteer opportunities that interest you?

Would you like to talk to someone further about what kinds of volunteer opportunities might match your skills, talents, and interests?

Are there any particular skills, talents, or interests you'd like to share?

What other organizations have you volunteered for, if any?

Are you a member of the YMCA? If so, which? _____
(Membership is not required to volunteer.)

Residences

Please list your former addresses (excluding your current address) starting with the most recent:

1. _____

Street address City State Zip

From when to when? (Include month and year) _____

2. _____

Street address City State Zip

From when to when? (Include month and year) _____

Please list your former addresses (excluding your current address) starting with the most recent:

3. _____

Street address City State Zip

From when to when? (Include month and year) _____

(If you have any other residences, please write on the back of this application)

Employment History

Please list your last three employers, starting with the most recent:

1. _____

Name of organization

Employed from when to when? (Include month and year) _____

Address

Telephone

State job title and describe your work

Name and title of immediate supervisor

2. _____

Name of organization

Employed from when to when? (Include month and year) _____

Address

Telephone

State job title and describe your work

Name and title of immediate supervisor

3. _____

Name of organization

Employed from when to when? (Include month and year) _____

Address

Telephone

State job title and describe your work

Name and title of immediate supervisor

Military history

Date of entry _____ Date of discharge _____

Branch of service _____ Type of discharge _____

Final rank _____

Did you attend service school or receive special training? _____

Education Note: Formal education is not required to be a volunteer. We welcome experience of all kinds!

	Name and location	Course of study	Start and end dates	Did you graduate?	Degree or diploma
High School					
Trade or Business					
College					
Other					

Other skills (caring for children, languages, etc.)

Background

Please list here any other names you may have used in the past:

- 1) _____
- 2) _____
- 3) _____

Driver's license number _____ Driver's license classification _____

Have you ever been convicted of a criminal offense? If so, what was it?

References

Please list three people besides relatives and employers whom you have known for at least two years and who know you well enough to provide us with a reference.

Close Related Relative

1. Name _____

Address _____

Telephone _____ Relationship to you _____

How long have you known this reference?

References (Can not be relatives or past employers)

2. Name _____

Address _____

Telephone _____ Relationship to you _____

How long have you known this reference?

3. Name _____

Address _____

Telephone _____ Relationship to you _____

How long have you known this reference?

Please list the names of relatives, friends, or acquaintances employed by the YMCA and their relationship to you.

Your signature: _____

Date: _____

Parent's or guardian's signature (if under 18) : _____

Date _____

Name _____

