



MORRIS CENTER YMCA -- VOLUNTEER APPLICATION 2010

Name _____ Date _____

Address _____

City _____ State _____

Zip _____ Home Phone: _____

Cell Phone _____ Business Phone _____

E-Mail Address: _____

Date of Birth: _____

Occupation: _____

Social Security # _____

Employer: _____

Address: _____

Special professional training, skills, hobbies: _____

Community Affiliations (Clubs, Service Organizations, etc.) _____

Previous Volunteer Experience: _____

Do you have Children in this Program? Yes No If yes, list full name and what level. _____

Special Certifications (i.e. CPR, Medical , etc.) _____

Driver's License # _____ State _____

Have you ever been convicted of or plead guilty to any crime(s): Yes No

If yes, describe each in full: _____

In which In which of the following would you like to participate? (Check one or more)

- Coaching Babysitting Aquatics Fitness Special Events Other
- Child care Youth & Family Dept.

Please list 3 references, at least one of which has knowledge of your participation as a volunteer in a program.

| Name | Phone |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |

As a condition of volunteering, I give permission for the YMCA organization to conduct a background check on me, which may include a review of sex offender registries, child abuse and criminal history records. I understand that, if appointed, my position is conditional upon the Morris Center YMCA receiving no inappropriate information on my background. I hereby, release and agree to hold harmless from liability the YMCA officers, employees, and volunteers thereof, or any other person or organization that may provide such information. I also, understand that regardless of previous appointments, the YMCA is not obliged to appoint me to a volunteer position. I understand I am subject to suspension, and/or removal for violation of the YMCA policies or code of conduct.

Applicants Signature: _____ Date _____

Applicants Name (please print or type) _____

Note: The YMCA will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

YMCA use only:
 Background check completed by _____ on _____
 System used for background check (minimum of one must be checked): Sex Offender Registry
 Criminal History Records Choicepoint*
**Please be advised that if you use Choicepoint and there is a name match in the few states where only name match search can be performed you should notify volunteers that they will receive a letter directly from Choicepoint in compliance with the Fair Credit Reporting Act containing information regarding all the criminal records associated with the name, which may not necessarily be the league volunteer.*

Only attach to this application copies of background check reports that reveal convictions of this applicant.