FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

It takes special people to bring the Y mission to life and we are always looking for enthusiastic volunteers to join our cause.

YMCA of Metro North HIGH ACCESS VOLUNTEER APPLICATION

Thank you for your interest in the YMCA of Metro North!

The YMCA is an equal opportunity employer and does not discriminate in recruitment, hiring or other terms or conditions of employment on the basis of race, color, religion, national origin, sex, disability, age or any other status protected by law.

If you would like to apply to join the YMCA volunteer team, please complete the application below.

- Be sure to write legibly
- The application must be completed in full.
- Do not leave any spaces blank or write "see resume" in response to any question.
- Read and sign the last page of the application.

Personal Information

Position Applying For: _____ Date:_____

Preferred YMCA Location: Location Date Available to Start: _____

NAME: _____E-mail: _____
Last First MI

Address: _____
City State ZIP

Telephone: Home _____Mobile_____ Other_____

Are you 18 years of age or older? *(If not, you may be required to provide work authorization.)*	○ Yes ○ No
If approved, can you provide verification of your legal right to work in the United States?	○ Yes ○ No
Can you perform the essential functions of the job for which you are applying, with or without reasonable accommodation?	○ Yes ○ No

Notice to All Applicants:

The YMCA enforces its policies and practices to prevent child abuse.

The YMCA of Metro North PROHIBITS ABUSE or MISTREATMENT OF YOUTH and enforces its policies and practices to prevent child abuse. We have abuse reporting procedures, there are unscheduled visits from supervisors, we have an open door for parents, and we have a code of conduct for staff and volunteers. We minimize opportunities for abuse to occur and we talk with children about personal safety and touching limits. We also screen carefully to prevent abusers from being hired and we provide child abuse prevention training to staff.

Employment Information

List available days/hours:

Sunday ☐	Monday ☐	Tuesday ☐	Wednesday ☐	Thursday ☐	Friday ☐	Saturday ☐

Preferred Job Status: ☐ Full-time ☐ Part-time ☐ Seasonal ☐ As Needed

Have you previously been employed by this YMCA or any other YMCA? ◯ Yes ◯ No

If yes, when? At which locations?

Have you previously volunteered at this YMCA or any other YMCA? ◯ Yes ◯ No

If yes, when? At which locations?

Do you have any relatives or household members currently working for this YMCA? ◯ Yes ◯ No

If yes, name(s) and relationship:

How did you hear about this opening?

Name of referral source:

☐ YMCA staff referral
☐ School _____
☐ Walk-in
☐ Website _____
☐ YMCA member
☐ Advertisement
☐ Other_____

Education & Training

Educational Background

	Name of School	City, State	Diploma Awarded	Degree	Major
☐ High School ☐ GED			◯ Yes ◯ No ◯ In Progress		
College			◯ Yes ◯ No ◯ In Progress		
Graduate School			◯ Yes ◯ No ◯ In Progress		
Vocational/ Other			◯ Yes ◯ No ◯ In Progress		

Describe any non-employment experience such as school or volunteer activities that might strengthen your application:

Safety & Job Specific Certifications

Type (CPR, First Aid, Lifeguard, Grp Ex, etc.)	Provider	Level	Expiration

Employment History

List all previous employment during the past seven years starting with the most recent. You may also submit your resume in addition to this application

Employer	Telephone /	Dates Employed From: ___/___ To: ___/___	Summarize the nature of the work performed and job responsibilities.
Address			
Job Title			
Immediate Supervisor and Title			
Reason for Leaving			
May we contact this employer? ◯ Yes ◯ No			

Employer	Telephone /	Dates Employed From: ___/___ To: ___/___	Summarize the nature of the work performed and job responsibilities.
Address			
Job Title			
Immediate Supervisor and Title			
Reason for Leaving			
May we contact this employer? ◯ Yes ◯ No			

Employer	Telephone /	Dates Employed From: ___/___ To: ___/___	Summarize the nature of the work performed and job responsibilities.
Address			
Job Title			
Immediate Supervisor and Title			
Reason for Leaving			
May we contact this employer? ◯ Yes ◯ No			

If this will be your first work experience, please list any school / community jobs / positions, or volunteer roles you have held.

Please explain any gaps in your employment history.

What other business / personal / volunteer experience, or training have you had that may have prepared you for this position?

Emergency Contacts

Name, Phone, Relationship

Name	Phone Number	Relationship

References

Please list 3 personal / professional, and one relative

Name: _____ Occupation: _____ Years Known: _____

E-mail: _____ Phone: _____ Alternate #: _____

Name: _____ Occupation: _____ Years Known: _____

E-mail: _____ Phone: _____ Alternate #: _____

Name: _____ Occupation: _____ Years Known: _____

E-mail: _____ Phone: _____ Alternate #: _____

Name: _____ Occupation: _____ Years Known: _____

E-mail: _____ Phone: _____ Alternate#: _____

Application Acknowledgement and Authorization

Please read all statements and sign below:

I authorize both the YMCA and persons listed (references, schools, current (unless noted) and former employers and any others with whom you desire to check) to communicate with regard to any relevant information that may be required to reach an employment decision. I agree to hold such persons harmless with respect to any information they may supply. I understand and agree that any offer of employment is contingent upon successful completion of all background check processes, including a criminal history background check.

I certify that all information provided by me in this application is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation, or omission of any facts in this application or any other document submitted in connection with YMCA employment will result in denial of employment or termination of employment regardless of the timing or circumstances of discovery.

If I am employed by the YMCA I understand my employment can be terminated, with or without cause and with or without notice, at any time at the option of the YMCA or myself. I understand that, other than the CEO of the YMCA, no manager, supervisor or representative of the YMCA has authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing. Only the CEO of the YMCA has the authority to make any agreement contrary to the foregoing and then only in writing. I further expressly agree that, with respect to the at-will employment relationship, this constitutes the full, complete and final expression of the parties' intent concerning the nature of any employment relationship between myself and the YMCA.

I understand that all offers of employment are conditional upon my ability to provide appropriate documents regarding my identity and legal right to work in the United States. I understand that this application is only valid for the position applied for at present and that the YMCA is not obligated to retain or consider this application for future openings. If hired, I agree to abide by YMCA policies and rules at all times. I acknowledge that I have read the above statements and understand them.

Signature: _____ Date: _____