



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

**Residential Housing
Application
Athol Area YMCA
545 Main St.
Athol, MA 01331**

Please print and complete entire application. DATE _____

NAME _____
FIRST MIDDLE LAST

LAST ADDRESS _____

PHONE NUMBER(S) _____ DATE OF BIRTH _____

LIVED IN A YMCA BEFORE? YES ___ NO ___ LOCATION AND DATE _____

WHO REFERRED YOU TO THE Y? _____

NAME OF EMPLOYER (OR SCHOOL) _____

POSITION HELD _____ LENGTH OF EMPLOYMENT _____

BUSINESS REFERENCE _____
NAME ADDRESS PHONE

POSITION HELD _____ LENGTH OF EMPLOYMENT _____

BUSINESS REFERENCE _____
NAME ADDRESS PHONE

POSITION HELD _____ LENGTH OF EMPLOYMENT _____

CHARACTER REFERENCE _____
NAME ADDRESS PHONE

CHARACTER REFERENCE _____
NAME ADDRESS PHONE

EMERGENCY CONTACT _____
NAME ADDRESS PHONE

IF YOU DRIVE A CAR PLEASE FILL OUT _____
MAKE MODEL COLOR STATE AND PLATE #

PLEASE READ AND SIGN: I hereby authorize the Athol Area YMCA to confirm any of the above information felt necessary to check my application.

Signature _____ DATE _____

STATEMENT OF APPLICANT

In the Athol Area YMCAs effort to attract the highest quality tenant. I have been advised that as a part of the application process for residence at the YMCA, an extensive inquiry will be made concerning my employment, activities, character, and health, and I fully consent to and authorize all such inquiries.

In the event of acceptance by the Athol Area YMCA, I will comply with all policies set forth and with other policies established from time to time by the organization. I further understand that inquiries may be made, concerning my background. I hereby waive any right to claim that any request or investigation is an invasion of my privacy, since they are made with my consent. I understand that my continued residency is contingent upon a clean criminal history background checks.

I understand that it is this agency's policy to secure conviction criminal history information (CORI and SORI) screening process. I have provided the following information for the sole purpose of a CORI and SORI file search. I understand that the Athol Area YMCA does not condone child abusers and that the Athol Area YMCA will be seeking information in my background related to child abuse.

NAME _____
 Last First Middle

Other name/names previously used _____

Birthday _____ Race _____ Sex _____

Social Security # _____ Driver License# _____

I certify that all statements made by me on this application are true to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand and agree that any misrepresentation or omission of facts could exclude me being considered for residence or after residence, may cause for termination of my stay here at the YMCA.

I understand that the YMCA will take any allegations or suspicious of child abuse seriously and will report such allegations to the police and state agencies for investigation.

I hereby acknowledge that I read and understood the above statement and that I voluntarily sign this application.

Signature of Applicant

Date



ATHOL AREA YMCA

RULES & REGULATIONS FOR RESIDENCE

1. Room rents must be paid at least one week in advance.
2. A one week deposit is required with first week's rent. This will be returned or applied to last week of rent if room is vacated in a clean condition and account is paid in full.
3. When vacating the room personal belongings should be removed and keys checked in at the front desk. Do not remove YMCA property.
4. Cooking is not allowed in rooms. Hot plates and electrical appliances of any type are forbidden. Microwaves are allowed.
5. YMCA is not responsible for lost or stolen articles. Lock room before leaving.
6. Intoxicating liquors or drugs shall not be brought into or used in any part of the building or on the property grounds. Violation of said may be subject to being vacated.
7. Indecency of any type such as profanity, obscenity, or vulgarity out of harmony with the purpose of the YMCA may be subject to being vacated.
8. Persons not considered appropriate to be near children will not be permitted to live in or visit your residence due to the activities and mission of the YMCA.
9. YMCA reserves the right to declare a room vacated without explanation upon verbal or written notice by those in authority.
10. The YMCA is a smoke-free facility and grounds. Smoking is prohibited in residence rooms, hallways, roof tops, or inside the building. Smoking is only permitted outside the building and not within 80 feet of an entry or exit way. ANY VIOLATION OF THIS MAYBE SUBJECT TO BEING VACATED.
11. Gambling is strictly forbidden.
12. Residence rooms may be used only by the persons who have rented such rooms and have registered, as required by law, at the main desk. One guest is allowed to visit in your r room (Male Only) until 11:00 P.M. No guests after 11:00 P.M. Room door is to remain open.
13. YMCA is not responsible for any articles left in room after check out date.
14. Any damage done to a room after a person has taken occupancy becomes the responsibility of the occupant. All damages will be deducted from any rent balance or will be billed to you.
15. If a resident pays a weekly rate for a room and leaves before that week is up, he will be entitled to a refund based on the daily rate.

- 16. Any issues or concerns that effects your stay here should be directed to the Executive Director or designee.
- 17. No resident should be subjected to any type of harassment. In turn no YMCA staff or volunteers should be subjected to the same by any resident. Any harassment should be reported to the Executive Director or designee.
- 18. Attempting to gain entry to any other room is forbidden and subject to being vacated.
- 19. Fire exits are for emergency use only.
- 20. Tenants must be dressed appropriately at All Times.
- 21. Personal hygiene, bathing, laundering of clothes, room cleanliness, and trash removal must be maintained.
- 22. Help to conserve energy use by shutting off lights when not needed and maintain proper heat settings in both rooms and hallway radiators.
- 23. Know were emergency exits are located, locations of fire extinguishers, and location of fire alarms. No items are to be left in hallways or near fire exits.
- 24. Criminal background checks are conducted during the application process and may be requested by the Executive Director at his or her discretion at any time.
- 25. No illegal weapons or firearms are permitted on YMCA property.

Residents enrolled in the Y Get Started program must adhere to all of the above rules as well as the program rules as outlined by _____ case manager.

These rules are subject to change at any time.

Jeanette Robichaud

Executive Director, Athol Area YMCA

I have read and understand the above rules and regulations of the Athol Area Y.M.C.A. I further understand that any infractions of the above may result in my being requested to vacate the room.

Residence Printed Name: _____

Residence Signature: _____

Date: _____



AYMCA
172G
FE629

CORI REQUEST FORM

Athol Area YMCA has been certified by the Criminal History Systems Board for access to all available criminal offender record information (CORI) and juvenile data on the following individual from the Criminal History Systems Board pursuant to Chapter 6, 172G, which mandates operators of camps for children to request CORI and juvenile data regarding all employees, volunteers, and housing prior to employment, volunteer, and residence service.

APPLICANT/EMPLOYEE INFORMATION (PLEASE PRINT)

LAST NAME FIRST NAME MIDDLE NAME

MAIDEN NAME OR ALIAS (IF APPLICABLE) PLACE OF BIRTH

DATE OF BIRTH XXX-____-____
SOCIAL SECURITY NUMBER MOTHER'S MAIDEN NAME

Former ADDRESSES _____

SEX ___ HEIGHT: ___ ft. ___ in. WEIGHT: _____ EYE COLOR: _____

STATE DRIVER'S LICENCE NUMBER: _____

***THE ABOVE INFORMATION WAS VERIFIED BY REVIEWING THE FOLLOWING FORM OF GOVERNMENT ISSUED PHOTOGRAPHIC IDENTIFICATION: _____

REQUESTED BY: _____
SIGNATURE OF CORI AUTHORIZED EMPLOYEE