

### **ATHOL AREA YMCA**

545 Main Street Athol, MA 01331 www.ymcaathol.org

# **VOLUNTEER APPLICATION**

### **YMCA MISSION**

The Athol Area Young Men's Christian Association (YMCA) is committed to strengthening and enriching the lives of all individuals, families and our community through quality programs and services that build healthy spirit, mind and body.

Volunteer Position	being applied for_	Notice to Applicants				
We consider each application without regard to age, race, gender, color religious creed, national origins, sexual orientation, criminal record, mental illness, handicap, disability, marital status or any other legally protected status pursuant to relevant federal, state, and local laws. Reasonable accommodations will be made for all applicants with disabilities and qualified volunteers.			The YMCA maintains a "zero tolerance' for abuse. Alcohol and/or illegal drug use will not be tolerated prior to, or while on duty.			
Please print or type.	Please complete all s	ections that apply.				
Personal Data						
Name	Last Six Digits of Social Security #					
Address	Home Phone #					
City	State	Zip	Cell Phone#			
E-mail Address						
Previous residence is	less than five (5) yea	rs:				
Best way to reach you	ı is	Best tin	ne to reach you is			
May we contact you a	t work?Yes	_No				
If yes, work number a	and best time to call_					
Volunteer Availa	bility					
What type of position	are you interested in	? (check all that apply	y)			
AquaticsHeal		n and Wellness				
Kid's Depot After-	After-School CareIndoor Playground					
Nursery School		Cus	stodian			
Family Fun Nights		Υοι	uthReach			
Other (please des	cribe)					

How many hours per week are you interested in?\_\_\_\_\_

What days and times are you available?\_\_\_\_\_

## **Employment and/or Volunteer History**

Provide the following information of your past and current employers or volunteer assignments, starting with your most recent. Have you ever worked or volunteered at another YMCA? \_\_\_\_No \_\_\_Yes If yes, where?\_\_\_\_\_ Employer\_\_\_\_\_\_Telephone #\_\_\_\_\_Job Title\_\_\_\_\_ Address Date Employed From to Reason for leaving \_\_\_\_\_\_May we contact for reference? \_\_\_\_\_Yes \_\_\_\_\_No Employer\_\_\_\_\_\_Telephone #\_\_\_\_\_\_Job Title\_\_\_\_\_ \_\_\_\_\_\_Date Employed From\_\_\_\_\_to\_\_\_\_ Address Reason for leaving May we contact for reference? Yes No List anything else (skills/experience/certifications) including other volunteer experiences that would qualify you to volunteer here at the Y. **Education:** School Name and Address (high school, college, trade) Major Course or Degree Program Diploma/Degree Received \_\_\_\_\_ School Name and Address (high school, college, trade)\_\_\_\_\_\_ Major Course or Degree Program\_\_\_\_\_ Diploma/Degree Received \_\_\_\_\_ References List at least three character references/persons that know you will and can attest to your abilities and suitability for YMCA volunteering (one reference must be a family member) \_\_\_\_\_Phone #\_\_\_\_\_Relation to you\_\_\_\_\_ Phone # Relation to you Name\_\_\_\_\_\_Phone #\_\_\_\_\_\_Relation to you\_\_\_\_\_

# **Applicant Statement**

Signature of Applicant	Date
I certify that I have read, fully understand and a statement.	accept all terms of the foregoing applicant
limiting the applicant's ability to perform satisfactori	e acceptance of volunteers on the basis of race, color, ancestry, or age; or on the basis of a handicap not ly the job available. The YMCA will give this application g it, the YMCA makes no commitment of volunteering  Initial
	Initial
I am not a child molester, abuser or pedophile; and h	Initial ave not been accused of being a molester or abuser.
licensing authorities and educational institutions and provided by me in this application, résumé or positiclaims I may have regarding the YMCA, its agents, and using such information in the application process furnishing such information about me. I am aware disclosure of the nature and scope of any report that	dersonal and professional), employers, public agencies, do to otherwise verify the accuracy of all information on interview. I hereby waive any and all rights and employees or representatives, for seeking, gathering and all other persons, corporations, organizations for that I have the right to make a written request for may be ordered. I understand upon acceptance of a minal background check prior to and during my
	MCA, its representatives, employees or agents to
I certify that all information I have provided in order to true, complete and correct, and I understand that any incomplete or misrepresented in any respect, will be suapplication, or (ii) immediately discharge me from the Y	ifficient cause to (i) cancel further consideration of this