



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

SHERIDAN COUNTY YMCA
Adult Volunteer Application: ages 18 and older

Date: _____

Name _____
(Last) (First) (Middle)

Address _____

City _____ ST _____ Zip _____

Phone: _____ E-Mail _____

Emergency Contact: _____ Phone: _____

Have you ever volunteered at a Y? Yes No If yes, in what capacity? _____

For what other organizations have you volunteered? _____

What volunteer opportunities interest you? Check all that apply.

- Spend time with child/family (parent volunteer) Give back to the community
- Meet people Volunteering is a requirement (How many hours _____) Other
- Court ordered School Other

In what area do you see yourself volunteering? Check all that apply.

- Health & Well-Being Special Events Aquatics Youth Sports
- Childcare Camp Arts Back Member Service Desk Janitorial
- Other (be specific) _____

What particular skills, talents or interests would you like to share with us? _____

Availability: Special Events Seasonal Call When Needed Varies

Please circle the days and list the times you prefer to volunteer:

Mon _____ Tues _____ Wed _____ Thurs _____

Fri _____ Sat _____ Sun _____

Employment History:

Please list your last 3 employers, starting with the most recent:

1. _____
Name of organization

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

Address Phone Number

State job title and briefly describe work

Name and title of immediate supervisor

2. _____
Name of organization

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

Address Phone Number

State job title and briefly describe work

Name and title of immediate supervisor

3. _____
Name of organization

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

Address Phone Number

State job title and briefly describe work

Name and title of immediate supervisor

Other Skills: (caring for children, languages, etc.) _____

Background:

Have you ever been convicted of a criminal offense? yes no If yes, what was the offense and when did it occur? _____

References:

Please list 3 personal references and one family reference whom you have known for at least 2 years and who know you well enough to provide us with a reference.

1.	_____	_____
	Name	Relationship to you
	_____	_____
	Address	Phone Number
2.	_____	_____
	Name	Relationship to you
	_____	_____
	Address	Phone Number
3.	_____	_____
	Name	Relationship to you
	_____	_____
	Address	Phone Number

Statement of Volunteer Applicant

In the event of my volunteering for the Sheridan County YMCA, I will comply with all policies set by the organization. I authorize the YMCA to request my employment record from any former employer(s). I further understand that inquiries may be made, concerning my background, experience and prior employment. 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 and it is in my interest that I be considered to volunteer. I understand that my continued volunteering is contingent upon an acceptable criminal history background check.

I understand that it is this agency's policy to secure conviction criminal history information as part of the pre-volunteer screening process. I understand that the Sheridan County YMCA does not condone child abusers or bullies, and that the Sheridan County YMCA will be seeking information in my background including child abuse. I have provided the following information for the purpose of obtaining a conviction only criminal history file search.

Name _____
(Last) (First) (Middle)

Maiden Name/Names Previously Used _____

Birth Date _____ Race _____ Gender _____

Social Security Number _____ Driver's License No. _____

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 would exclude me from being considered as a volunteer.

Applicant's signature

Date