



Merrimack Valley YMCA

Volunteer Application

Name: _____ Email: _____

Address (Street/City/State/Zip): _____ Date of Birth: _____

Telephone #: _____ Best time/way to contact you: _____

Emergency Contact and Relationship: _____

Telephone #: _____ Email: _____

Branch: Andover/North Andover Lawrence Methuen Administrative Services Camping Services

Please check the days/times you are available to volunteer:

Sunday Monday Tuesday Wednesday Thursday Friday Saturday

Morning Afternoon Evening Other: _____ When are you available to start: _____

Do you have child currently in our programs: Yes No Are you a current YMCA member: Yes No

Please check what areas/programs are of interest to you (check as many that apply):

- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Administrative | <input type="checkbox"/> Preschool/Child Care | <input type="checkbox"/> Events |
| <input type="checkbox"/> Fitness Center | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Aquatics |
| <input type="checkbox"/> Sports | <input type="checkbox"/> Arts and Humanities | <input type="checkbox"/> Teens |
| <input type="checkbox"/> Education | <input type="checkbox"/> Boards | <input type="checkbox"/> Other: _____ |

Please note: Volunteering in certain areas may have age specifications or may require specific qualifications, certifications, or experience.

Current or past volunteer experience/training, certification, and/or education: _____

Please check how you have learned about volunteering at the Merrimack Valley YMCA:

Member Volunteer YMCA Staff Other: _____

Please check which descriptions(s) fits your current status:

Employed full-time Employed part-time Student full-time Student part-time
 Retired Stay-at-home parent Other: _____

Present employer (if applicable): _____

Do you have any relatives/friends who work at our YMCA: Yes (If yes, who are they: _____) No

Have you previously been employed by the YMCA: Yes (If yes, please provide details: _____) No

Please provide the names, telephone numbers and their relationship to you of three individuals who have known you for a period of three years or more and can speak to questions of your character, experience, and/or ability:

Name	Telephone #	Relationship
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Please read before signing:

In the Merrimack Valley YMCA's efforts to attract the highest quality volunteers, I have been advised that as part of the application process for volunteering, inquiry will be made concerning my prior employment, activities, character, and health. This inquiry will include conviction criminal history information, sex offender registry information, information in my background related to child abuse, and a reference check. I fully consent and authorize all such inquiries. By signing below, I acknowledge and agree that I will provide all requested information for the sole purpose of completing a criminal history file search. I understand that my continued volunteering is contingent upon a clean criminal history background check.

In the event of my volunteer relationship with the Merrimack Valley YMCA, I will comply with all policies established by the Merrimack Valley YMCA, as well as the specific program. An online Child Abuse Prevention training must be completed prior to volunteering at the YMCA. Information regarding the online training will be provided after completion of the application. I also understand, I am not allowed to fraternize with YMCA youth members or participants outside of YMCA programs, including, but not limited, to babysitting or inviting children to my home unless a previous relationship exists.

I understand that the Merrimack Valley YMCA will take any allegations of suspicions of child abuse seriously and will report such allegations to the police and state agencies for investigations. The YMCA is mandated, by the state of law, to report any suspected cases of child abuse or neglect to the appropriate authorities for investigation.

I understand that at no time may a volunteer be alone with a single child where they cannot be observed by others. This means no one-on-one supervision of children. I also understand that the YMCA prohibits inappropriate talk, jokes, or sharing details of one's personal life, and any kind of harassment in the presence of children, parents, or staff. Harassment at the Merrimack Valley YMCA is taken seriously and should be immediately reported to the Human Resources Department.

I certify that all statements made by me on my volunteer application and paperwork 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 my being considered for volunteering. Any misrepresentation or omission of facts discovered after volunteering may be cause for termination with the YMCA.

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

_____ Volunteer Signature	_____ Name (printed)	_____ Date
_____ Department Leader Signature	_____ Name (printed)	_____ Date
_____ Service Line Leader Signature	_____ Name (printed)	_____ Date

For Office Use Only:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Application | <input type="checkbox"/> SORI | <input type="checkbox"/> CORI | <input type="checkbox"/> References (at least 2) |
| <input type="checkbox"/> Entered into Daxko | <input type="checkbox"/> Redwood CAP Training | <input type="checkbox"/> EEC (for Child Care) | |