YMCA OF GREATER BOSTON
VOLUNTEER APPLICATION

Thank you for considering the YMCA as a place to donate your name and talents. Volunteers are vital to the YMCA. Without them, we wouldn’t be able to meet the needs of the kids, families, and adults who live in our community.

At the YMCA, we know that your time and talent are precious, and we want every minute you spend with us to be worthwhile. That’s why we’re asking you to take a few minutes to fill out this application. It will help us begin to make the right match between your skills and interests and the opportunities available.

You will find questions on this form about your background, former residences, places of employment, and so on. We hope you’ll understand that, unfortunately, there are a few people who apply for volunteer jobs at the YMCA for the wrong reasons. The YMCA, however, makes an active effort to prevent abuse. So even though we may know you well, we reserve the right to conduct background and references checks on all volunteers. It’s just one of the many ways we help protect children and other vulnerable people served by the YMCA.

Thanks for your cooperation in this effort and your interest in the YMCA.

Today’s Date __________________________ 
(Month-Day-Year)

☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. ☐ Rev. ☐ Dr. ☐ Other

Name ____________________________ (Last) ____________________________ (First) ____________________________ (Middle)

Address __________________________________________________________

City ____________________________ State ____________________________ Zip Code ____________________________

Day Phone: ____________________________ Evening: ____________________________

How long have you been at this address? ____________________________ Social Security #: ____________________________

Are you 18 years of age or older? ☐ Yes ☐ No (If no, please have your parent or guardian sign the application, too).

Emergency Contact

Name ____________________________ (Last) ____________________________ (First) ____________________________ (Middle)

Address: __________________________________________________________

City ____________________________ State ____________________________ Zip Code ____________________________

Day Phone: ____________________________ Evening: ____________________________

Interests

How did you learn about volunteer opportunities at the YMCA?

______________________________________________________________

______________________________________________________________

Volunteer Application Form – Rev. 04-13-11
Why would you like to volunteer?

________________________________________________________________________

________________________________________________________________________

Have you heard about any particular volunteer opportunities that interest you?

________________________________________________________________________

________________________________________________________________________

Would you like to talk to someone further about what kinds of volunteer opportunities might match your skills, talents and interests?

________________________________________________________________________

________________________________________________________________________

Are there any particular skills, talents, or interests you’d like to share?

________________________________________________________________________

________________________________________________________________________

What other organizations have you volunteered for, if any?

________________________________________________________________________

________________________________________________________________________

Are you a member of the YMCA? __________________________

(Memberhip is not required)

**Employment History**

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

1. 
   **Name of Organization** __________________________________________
   **Employed from when to when?**
   **(include month and year)** __________________________________________
   **Address** __________________________________________
   **Telephone** __________________________________________
   **State job title and describe your work** __________________________
   **Name and title of immediate supervisor** __________________________

2. 
   **Name of Organization** __________________________________________
   **Employed from when to when?**
   **(include month and year)** __________________________________________
   **Address** __________________________________________
   **Telephone** __________________________________________
   **State job title and describe your work** __________________________

Volunteer Application Form – Rev. 04-13-11
Name and title of immediate supervisor

3.

Name of Organization

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

Address

Telephone

State job title and describe your work

Name and title of immediate supervisor

Military History

Date of entry __________________________ Date of discharge __________________________

Branch of service ______________________ Type of discharge __________ Final rank __________

Did you attend service school or receive special training?

Education Note: Formal education is not required to be a volunteer. We welcome experience of all kinds!

<table>
<thead>
<tr>
<th>High School</th>
<th>Name and Location</th>
<th>Course of study</th>
<th>Start and end dates</th>
<th>Did you Graduate?</th>
<th>Degree or Diploma</th>
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<td>Trade or Business</td>
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<td>Other</td>
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Other skills (caring for children, languages, etc.)

Volunteer Application Form – Rev. 04-13-11
Background

Please list here any other names you may have used in the past: ____________________________________________

Driver's license number ___________________________ Driver's license classification _______________________

References

Please list three people besides relatives and employers whom you have known for at least two years and who know you well enough to provide us with a reference.

1. Name ____________________________________________
   Address ____________________________________________
   Telephone ___________________________ Relationship to you ___________________________
   How long have you known this reference? ____________________________________________

2. Name ____________________________________________
   Address ____________________________________________
   Telephone ___________________________ Relationship to you ___________________________
   How long have you known this reference? ____________________________________________

3. Name ____________________________________________
   Address ____________________________________________
   Telephone ___________________________ Relationship to you ___________________________
   How long have you known this reference? ____________________________________________

Please list the names of relatives, friends, or acquaintances employed by the YMCA and their relationship to you.

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Your signature ___________________________ Date ___________________________

Parent's or guardian signature ___________________________ Date ___________________________
(If you're under 18)
STATEMENT OF VOLUNTEER APPLICANT

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In the YMCA of Greater Boston's efforts to attract the highest quality volunteer staff, I have been advised that, as a part of the application process for volunteer service with the YMCA, an extensive inquiry will be made concerning my prior employment, activities, charter, and health, and I fully consent to and authorize all such inquiries.

If the YMCA accepts my volunteer service, I will comply with all policies set forth in the volunteer handbook and with other policies established from time to time 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 it is made with my consent and it is in my interest that I can be considered for volunteer service. I understand that my continued involvement as a volunteer is contingent upon a clean criminal history background check. I understand that for some volunteer assignments, health screenings are required by law and for such assignments my involvement as a volunteer will be contingent upon passing the health screenings or otherwise meeting licensing standards.

I understand that it is this YMCA’s policy to secure conviction-only criminal history information as a part of the screening process for volunteers. I have provided the following information for the sole purpose of the YMCA’s obtaining a conviction-only criminal history file search. I understand that the YMCA does not condone child abusers and that the YMCA of Greater Boston will be seeking information in my background related to child abuse.

Name (Last, first, middle)

Names previously used/name before marriage

Birthday __________________________ Race __________________________ Color __________________________

Social Security Number __________________________

Driver’s License Number __________________________

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 my being considered for volunteer service or, after my service begins, may be cause for termination.

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

I also understand that the YMCA strongly discourages any fraternization outside of YMCA programs between volunteer staff members and youth participants. I understand that if a volunteer wishes to fraternize due to a family relationship or longstanding friendship with a participant or the participant’s family, such fraternization should be disclosed to the volunteer’s immediate supervisor. Furthermore, it should not take place without the presence of another adult.

I understand that written approval of such fraternization must be obtained from the supervisor or another YMCA representative. All other personal contact between volunteer staff members and youth participants is prohibited.

I understand agree that if my service as a volunteer is accepted, there is no contract period for volunteer service and my volunteer service would be solely “at will,” giving either me or the YMCA the right to terminate my volunteer service at any time without liability or obligation.

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

Signature of applicant __________________________ Date _______________

Signature of parent or guardian if applicant is under 18 __________________________ Date _______________
APPENDIX VI

YMCA of Greater Boston Volunteer Commitment Statement

Volunteers are a welcome and enriching aspect of YMCA Programs. The achievement of our mission and goals is best served by the active participation of citizens from our community.

Volunteer Rights and Responsibilities

Volunteers are viewed as a valuable resource to YMCA, its staff, and its clients. Volunteers shall be extended the right to be given meaningful assignments, the right to be treated as equal co-workers, the right to effective supervision, the right to full involvement and participation, and the right to recognition for work done. In return, volunteers shall agree to actively perform their duties to the best of their abilities and to remain loyal to the mission, goals and procedures of the YMCA.

Confidentiality

Volunteers are responsible for maintaining the confidentiality of all proprietary or privileged information to which they are exposed while serving as a volunteer, whether this information involves a single staff, volunteer, client, other person, or involves overall agency business. Failure to maintain confidentiality may result in termination of the volunteer's relationship with the YMCA or other corrective action.

Child Abuse Prevention

It is our policy that all necessary measures will be taken to ensure a safe environment for all children and to ensure professional conduct of all staff and volunteers. Volunteers should be aware that YMCA employees and volunteers are mandatory reporters of child abuse. Volunteers agree to report any suspicious behavior of a child or adult to their supervisor or a YMCA staff member immediately. When volunteering with children, volunteers agree to work with another volunteer or staff to avoid being alone with children. In an effort to protect the children, all volunteers agree not to be alone with any single child in an area or location where other staff or volunteers cannot easily observe them.

Dress Code

As representatives of the YMCA of Greater Boston, volunteers, like staff, are responsible for presenting a good image to clients and the community. Volunteers shall dress appropriately for the conditions and performance of their duties. Volunteers must wear their identification badge when volunteering in programs.

Tracking Volunteer Hours

All volunteers are required to check in at the front desk. Volunteers will have to sign in and put on their identification badge. At the end of their day, volunteers are asked to sign out and return their identification badge. Staff will monitor the volunteer hours and reward volunteers accordingly.
Code of Conduct

To protect YMCA staff, members, volunteers, and program participants and their parents, the YMCA of Greater Boston requires each individual staff person and program volunteer to carefully read and sign this Code of Conduct. This Code of Conduct outlines behaviors and procedures to protect children and to protect individuals interacting with children in YMCA programs and facilities.

1. A child will never be left unsupervised.

2. An individual will not be alone with a single child where they cannot be observed by others. As individuals supervise children, they should space themselves in a way that other staff or volunteers can see them.

3. A child's right to not be touched in ways that make them feel uncomfortable, and their right to say no will be respected. Other than diapering, children are not to be touched on areas of their bodies that would be covered by a bathing suit.

4. Restrooms must be checked to be sure they are not occupied by suspicious or unknown individuals before allowing children to use the facilities. The individual supervising will stand in the doorway while children are using the rest-room. This policy allows privacy for the children and protection for the supervising individual. While assisting younger children, doors to the facility must remain open. No child, regardless of age, should ever enter a bathroom alone on a field trip. Always send children to the restroom in pairs, and whenever possible, with supervision.

5. Staff and volunteers should conduct or supervise private activities such as diapering, putting on bathing suits, taking showers, etc. in pairs. When this is not feasible, individuals should be positioned so that they are visible to others.

6. Staff and volunteers will not abuse children including:
   - No corporal punishment or any type of physical discipline inflicted in any manner upon the body including spanking, shaking or slapping.
   - No cruel, unusual or severe punishment, humiliation, verbal abuse, ridicule, threats or shaming.
   - No inappropriate touching or sexual verbal exchange.
   - No denial of food, drink, rest or bathroom facilities as punishment.
   - No punishment for soiling, wetting or not using the toilet.
• No punishment related to eating or not eating food. Any type of abuse will not be tolerated and may be cause for immediate dismissal.

7. Positive techniques of guidance, positive reinforcement and encouragement rather than competition, comparison and criticism will be used to direct children. Age appropriate expectations, guidelines and environments will be established that minimize the need for discipline. Physical restraint will be used only in pre-determined situations (necessary to protect the child or other children from harm), administered in a prescribed manner and documented in writing when used.

8. Each child’s appearance will be observed daily, noting any fever, bumps, bruises, burns, etc. Any questionable marks or behavior will be noted in writing and given to a program supervisor.

9. Children will be responded to with respect, consideration and treated equally regardless of sex, race, religion, culture or ability to pay. Care will be given to respect children’s special needs.

10. Individuals will refrain from intimate displays of affection towards others in the presence of children, parents, and staff.

11. While the YMCA does not discriminate against an individual’s lifestyle, it does require that in the performance of their job they will abide by the standards set forth by the YMCA.

12. Individuals must appear clean, neat, and appropriately attired including ID badge during hours of operation.

13. Using, possessing, or being under the influence of alcohol or illegal drugs during working hours is prohibited.

14. Smoking or use of tobacco in the presence of children or parents during working hours is prohibited.

15. Profanity, inappropriate jokes, sharing intimate details of one’s personal life, and any kind of harassment in the presence of children or parents is prohibited.

16. Individuals must be free of physical and psychological conditions that might adversely affect children’s physical or mental health. If in doubt, an expert should be consulted.

17. Staff and volunteers will portray a positive role model for youth by maintaining an attitude of respect, loyalty, patience, courtesy, tact, and maturity.

18. Individuals may not be alone with a child they meet in YMCA programs outside of the YMCA. This includes babysitting, sleepovers, and inviting children home. Any exceptions require a written explanation before the fact and are subject to advance executive approval.

19. Children are not to be transported in personal vehicles without written executive approval and verification of insurance and driving record.
20. Staff and volunteers may not date program participants under the age of 18 years of age.

21. Under no circumstances should children be released to anyone other than the authorized parent, guardian, or other adult authorized by the parent or guardian written.

Staff and volunteers are required to read and sign all policies related to identifying, documenting, and reporting child abuse and attend trainings on the subject, as instructed by their supervisor.

________________________________________
Volunteer Signature

________________________________________
Date

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