



**FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

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

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, and places of employment. We hope you'll understand that, unfortunately, not everyone will be appropriate to volunteer at the Y. We make an active effort to prevent abuse. So even though we may know you well, we reserve the right to conduct background and reference checks on all volunteers. It's just one of the many ways we help protect children and other vulnerable people served by the YMCA of Paterson

Thanks for your cooperation in this effort and your interest in the Y. If you have any questions about this or any part of our application process, please contact **Tiyaana Garcia, 973-684-2320 x 48 or email opportunities@ymcaofpaterson.org**.

PERSONAL INFORMATION

First Name : _____ **Last Name:** _____

Address: _____

Phone: (____) _____ **Email:** _____

DOB: ____/____/____ **Applicant Identification (Optional):** 1. Gender: M F

What is the best method to contact you? Email Call Text Mail

Are you a current YMCA member? Yes No

Employer/School*: _____ **Occupation:** _____

Language(s) spoken: _____

Emergency Contact Name: _____ **Phone:** _____

Relationship: _____

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VOLUNTEER INFORMATION

Have you ever volunteered at the YMCA?. Yes No

If yes, in what capacity _____ Are you required to volunteer? Yes No

If yes # of hours needed _____ Deadline _____

Name of School/agency/government body requiring community service: _____

Skills/Interests- I enjoy (Mark all that apply):

- _____ talking on the phone
- _____ answering phones/making calls
- _____ talking to small groups
- _____ reading to children
- _____ teaching
- _____ meeting new people
- _____ mentoring kids or teens
- _____ connecting people
- _____ coordinating and organizing
- _____ decorating
- _____ organizing events or planning parties
- _____ doing crafts or DIY projects
- _____ office work
- _____ painting
- _____ cleaning
- _____ gardening or working outdoors
- _____ cooking

Other _____

Are you volunteering as a part of a group? Yes No

Group/Org Name: _____

May we contact you with future volunteer opportunities? Yes No

AVAILABILITY: ongoing One-time event Call as needed Seasonal Other

REFERENCES: List three references that have known you at least three years whom you authorize us to contact:

First & Last Name	Years Known	Relationship	Direct Phone Number	Email Address
1				
2				
3				

***Please do not include relatives/household members**

BACKGROUND CERTIFICATION

Because the YMCA strives to provide a safe environment for children and youth, I understand that the YMCA will order the applicable criminal background check(s), and I fully consent to and authorize all such inquiries. I understand that my continued involvement as a volunteer is contingent upon a criminal history background check.

Legal Name (last, first, middle): _____

Other names used (nickname, maiden name): _____

Previous Address (if less than 6 months at current address): _____

If you have lived in another state in the past 7 years, please provide your previous address(es) in that state.

VOLUNTEER AGREEMENT

Please read and initial each statement carefully. This agreement is entered into between the YMCA of Paterson and _____ to govern volunteer services.

By initialing below, I understand that:

_____ I am a volunteer for a non-profit social service agency and I am donating my time/service to the YMCA of Paterson ("YMCA"). I will not receive any compensation, benefits or exchange of privileges in return for service.

_____ No reimbursement for any personal expenses or auto use related to this position shall be provided unless clearly agreed upon in advance.

_____ If I am injured while volunteering for the YMCA, I will not receive workers compensation. I further release the YMCA of Paterson, its sponsors, staff and partners from all claims of injury which may be sustained while participating in any YMCA sponsored activity, whether caused by the negligence of the YMCA or otherwise. If medical attention is required, I give my permission for such medical care.

_____ I may encounter confidential and/or proprietary information, and I agree to keep said information confidential.

_____ Failure to perform my assigned duties or follow YMCA policies, practices and/or the Volunteer Handbook may result in the termination of the volunteer relationship. Either the YMCA or I can sever the volunteer relationship at any time with or without notice or cause.

_____ I give permission for the YMCA to use, without limitation or obligation, photographs or other media that may include my image or voice to promote or interpret YMCA programs. Information may be released through public media, but not limited to websites, social media, artwork, contests, printed material, etc.

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 authorize the YMCA of Paterson to investigate and verify any and all of the information I have submitted. I understand and agree that any misrepresentation or omission of facts would exclude me from consideration for volunteer service or, after my service begins, may be cause for ending my service. I hereby acknowledge that I have read and understand the above statements and I voluntarily sign this application.

Signature of Applicant: _____ \

Date: _____

Signature of Parent/Guardian (if applicant under 18): _____

Date: _____