



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

## GREATER WATERBURY YMCA VOLUNTEER APPLICATION

Thank you for considering the Greater Waterbury YMCA 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 children, families, and adults who live in our community.

At the YMCA, we know that your time and talents 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, 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 Waterbury YMCA.

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 Volunteer application process, please contact our HR Department.

Name \_\_\_\_\_  
(Last) (First) (Middle)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Day \_\_\_\_\_ Evening \_\_\_\_\_

How long have you been at this address? \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Are you 18 years of age or over?  Yes  No (If no, have your parent/guardian sign the application, too)

### Emergency Contact Information

Name \_\_\_\_\_  
(First) (Last) (Relationship)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Day \_\_\_\_\_ Evening \_\_\_\_\_

**YOUR INTERESTS**

How did you learn about volunteer opportunities at the YMCA? \_\_\_\_\_

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Why would you like to volunteer? \_\_\_\_\_

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Is this volunteer service required? If Yes, why and by who? \_\_\_\_\_

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What specific volunteer opportunities interest you? (check all that apply)

- |   |                                       |                                       |                                      |                                       |
|---|---------------------------------------|---------------------------------------|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Group X Instructor | <input type="checkbox"/> Maintenance  | <input type="checkbox"/> Board Member | <input type="checkbox"/> Aquatics    | <input type="checkbox"/> Service Desk |
| <input type="checkbox"/> Board Committee    | <input type="checkbox"/> Youth Sports | <input type="checkbox"/> Office       | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Camp Youth   |
| <input type="checkbox"/> Programs           | <input type="checkbox"/> Other: _____ |                                       |                                      |                                       |

What is your availability? (times/days) \_\_\_\_\_

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

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Are there any skills, talents, or interests you'd like to share? \_\_\_\_\_

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What other organizations (or Y's) have you volunteered for, if any? \_\_\_\_\_

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Are you a member of the YMCA? \_\_\_\_\_

(Membership is not required)

**Current Employment**

\_\_\_\_\_  
Name of organization

Employed Dates? From: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ To: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (include month and year)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

State job title and describe your work \_\_\_\_\_

\_\_\_\_\_

Name and title of immediate supervisor \_\_\_\_\_

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

	Name and Location	Course of Study	Start and End Dates	Did You Graduate?	Degree or Diploma
High School					
Trade or Business					
College					
Other					

**Other skills or Certifications** (CPR, First Aid, languages, etc.) \_\_\_\_\_

\_\_\_\_\_

**Background**

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

\_\_\_\_\_

Driver's license number \_\_\_\_\_ Driver's license classification \_\_\_\_\_

**NOTE:** The Greater Waterbury YMCA conducts background checks on all volunteers!

**References**

Please provide 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.

\*We perform online reference checks via Checkster as part of our recruiting process. We ask that you take this opportunity to show us what sets you apart from other candidates. You will soon receive an email inviting you to register with Checkster online. Once registered, the system will prompt you to invite at least 5 references: (4 professional and 1 personal) NOTE: Your personal reference can be a family member, but not a parent or child.

\*We would like this process to take no longer than 48 hours, so please make sure your references respond within this timeframe.

If accepted as a Waterbury YMCA Volunteer, I will complete a Membership Application (if applicable), read and agree to the Member Code of Conduct, sign the Liability and Photo Release, abide by the Waterbury Y Personnel Policies, and agree to a Background Check.

I certify that the information provided in this application is accurate and complete.

I understand that misrepresentation or omission of facts in connection to my application for volunteering at the Greater Waterbury YMCA will be grounds for rejection and dismissal from my volunteering.

Your signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's or guardian's signature \_\_\_\_\_ Date \_\_\_\_\_

*(Only if you're under 18 years old)*

For Department of Labor reporting purposes please check one of the following that best represents your ethnic background:

- White  Black  Hispanic  Asian or Pacific Islander  Amer. Indian or Alaskan Native  Other

**WATERBURY YMCA VOLUNTEER WORKERS COMPENSATION ACKNOWLEDGEMENT**

**\*PLEASE READ CAREFULLY BEFORE SIGNING**

IF VOLUNTEER IS AT LEAST 18 YEARS OLD, THEN VOLUNTEER MUST READ AND SIGN BELOW:

I understand as a volunteer, that I am not an employee of the Waterbury YMCA and understand and agree that I will not receive any compensation or benefit nor be eligible for any coverage under the Connecticut Workers Compensation Laws.

I HAVE CAREFULLY READ THE FOREGOING STATEMENT, UNDERSTAND ITS CONTENTS, AND ACKNOWLEDGE THAT I AM SOLELY RESPONSIBLE FOR ANY INJURIES INCURRED WHILE VOLUNTEERING WITH THE WATERBURY YMCA.

Printed name of Volunteer

Signature of Volunteer

Date

IF VOLUNTEER IS UNDER 18 YEARS OLD, THEN PARENTS MUST READ AND SIGN BELOW:

I understand as my minor child is a volunteer, that my minor child is not an employee of the Waterbury YMCA and understand and agree that my minor child will not receive any compensation or benefit nor be eligible for any coverage under the Connecticut Workers Compensation Laws.

I HAVE CAREFULLY READ THE FOREGOING STATEMENT, UNDERSTAND ITS CONTENTS, AND ACKNOWLEDGE THAT I AM SOLELY RESPONSIBLE FOR ANY INJURIES INCURRED BY MY MINOR CHILD WHILE HE OR SHE IS VOLUNTEERING WITH THE WATERBURY YMCA.

**Both Parents/Guardians must sign:**

Printed name of Parent/Guardian

Signature of Parent/Guardian

Date

Printed name of Parent/Guardian

Signature of Parent/Guardian

Date

Printed name of Volunteer

Signature of Volunteer

Date

**For Office Use ONLY:**

- Completed Application
- WC Release
- Authorization for Background checks
- Emergency Info
- Photo ID

**Approvals**

Supervisor Print Name \_\_\_\_\_ Date\_\_\_\_\_

Supervisor Signature \_\_\_\_\_ Date\_\_\_\_\_