

YVOLUNTEERS™

We build strong kids, strong families, strong communities.

APPLICATION

Branch: _____

Sport: _____

Level: _____

Access Completed: _____

Supervisor: _____

CBC Completed: _____

Thank you for your interest in becoming a volunteer with the YMCA of Greater Indianapolis. The YMCA is committed to building strong kids, strong families and strong communities. We would not be able to achieve this without the passion, hard work and dedication of our volunteers. Please take time to fill out this application. We are excited about the opportunity to possibly partner with you as we help serve our community!

YOUR NAME: _____ **TODAY'S DATE:** _____

What volunteer opportunity are you interested in?

Have you ever volunteered with the YMCA before? If so, when and in what capacity?

What do you hope to gain from your volunteer experience?

What skills/training or knowledge do you wish to share through your volunteer experience?

When are you available to volunteer? (please include specific days of the week and times)

Do you have any physical or medical conditions that would effect your ability to perform certain volunteer duties, or that the YMCA should be aware of? Yes No

If Yes, please explain _____

PERSONAL INFORMATION

Last name:			First name (legal) :			M.I.		
Race: <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander								
<input type="checkbox"/> Asian <input type="checkbox"/> America Indian or Alaska Native <input type="checkbox"/> 2 or more races								
Address:								
City:			State:			Zip:		
County of Residence:			Daytime Phone:			Cell Phone:		
Email:								
Employer:								
Profession (Past/Present):								
Emergency Contact Name:						Phone:		
<i>The information requested below is required to obtain a Limited Criminal History Check. Each volunteer is required to have a Criminal History Check. Convictions may be relevant if activity-related, but may not immediately prevent your participation.</i>								
Date of Birth: (mm/dd/yy)					S.S.# (required)			
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female								
Have you ever been convicted of a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No								
If YES, explain : _____								
Are you volunteering to fulfill court-ordered community service? <input type="checkbox"/> Yes <input type="checkbox"/> No								
T-shirt size: (please circle one) S M L XL XXL XXXL								
<i>Please provide three references (other than relatives). If employed, please list supervisor.</i>								
Name			Relationship			Phone & E-Mail		
1.								
2.								
3.								

_____ Volunteer Signature

_____ Date

_____ Parent/Guardian Signature
(if applicant is under the age of 18)

_____ Date

**YMCA OF GREATER INDIANAPOLIS
VOLUNTEER'S AUTHORIZATION TO RELEASE INFORMATION**

I understand that the YMCA is committed to its mission of providing programs that support strong kids, strong families and strong communities and makes every effort to ensure a safe environment for staff, members, program participants, and volunteers.

To that end, in conjunction with application for volunteer service for the YMCA of Greater Indianapolis, I authorize the YMCA to use Selection.com, a third party vendor, to obtain information about any criminal history and/or criminal records, in my background.

I understand that you may rely on the above referenced information in determining whether to extend an offer of volunteer service to me. If the YMCA contemplates making an adverse decision that will affect me based, in whole or in part, upon criminal history and/or criminal records obtained from Selection.com¹, I will be provided with a copy of the report and may solicit Selection.com directly to question the information. I understand that these are my rights under the Fair Credit Reporting Act, which governs third party collection of this kind of data.

I have read the above disclosure and I hereby authorize the YMCA, Selection.com or its authorized agents to obtain the above referenced information about me. If I am chosen as a volunteer, this authorization shall remain on file and shall serve as an ongoing authorization for the YMCA to obtain any criminal history and/or criminal records about me from Selection.com at any time during my service with the YMCA. A photocopy or facsimile of this authorization shall be as valid as the original.

Print Name: _____

Signature _____

Date: _____

THIS FORM IS FOR PERMANENT RETENTION IN THE VOLUNTEER'S FILE.

¹ As Selection.com is headquartered in Ohio, I understand and agree that any and all disputes arising from this shall be brought only in state or federal court in the State of Ohio and shall be governed by, and construed in accordance with, the laws of the State of Ohio.