

Volunteer Application

Dear High School Community Volunteer Applicant:

Thank you very much for inquiring about becoming a volunteer at the Lake Wales Family YMCA. From its very beginning, the YMCA was a volunteer founded organization – in the YMCA’s early history, all the people delivering programs and services at Ys were volunteers. In turn, volunteer development has been a priority of the YMCA for years.

We look forward to having you volunteer at our YMCA. In order to begin your service here, we ask that you please complete the attached packet of information. Within the packet, you will find an application, reference requests, and a form to complete a background check (statement of applicant form). Please fill out all of the forms completely and honestly. We cannot process incomplete forms and this will only hold up the process. Please feel free to ask if you have questions.

Once the completed packet is submitted, it typically takes 3 to 4 days for us to complete the necessary follow up. After this is done, we will contact you to begin.

We take your role as a volunteer very seriously here and we want your time spent with us to be spiritually rewarding. If at any time during this process, or as you volunteer with us, should you have any question or concerns, please let us know.

Thank you very much for inquiring about becoming a volunteer here at the Lake Wales Family YMCA.

Management and Staff of the Lake Wales Family YMCA



LAKE WALES FAMILY YMCA
1001 Burns Ave Lake Wales, FL 33853
863-676-9441

Volunteer Recommendation from Parent

In an effort to protect the children and all members in our programs, the Lake Wales Family YMCA screens all volunteers. Part of this screening process is to obtain recommendations on all volunteers. Please complete this form on behalf of the named volunteer applicant.

Volunteer Name: _____

School Name: _____

How long have you known the applicant? _____ years _____ months

In what capacity have you known this applicant?

Would you recommend the applicant to work with children? Yes No

Do you know of any reason why this applicant should not work with children?

Yes No If Yes, please explain: _____

On a scale of 1 to 10, with 10 being the highest, please rate the applicant's moral character in your opinion. (please circle)

1 2 3 4 5 6 7 8 9 10

By signing, I affirm that the above information is accurate and true to the best of my knowledge.

Parent Signature: _____

Print Name: _____

Phone #: _____

Thank you for taking the time to assist us in screening our volunteers.



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Drivers 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 as a volunteer.

I understand that the YMCA will take any allegations or suspicions of child abuse seriously and will report such allegations to the police and state agencies for investigation. I also understand that if selected as a YMCA volunteer, I am not allowed to fraternize with YMCA youth members or participants outside of YMCA programs, especially babysitting or inviting children to my home.

Have you ever pled nolo contendere (no contest), been found guilty of, or admitted guilt to a crime which is a misdemeanor or felony as an adult or its equivalent as a juvenile? No Yes
If yes, explain. (A "yes" response will not necessarily eliminate you as a candidate for this volunteer position) If you are applying for community service, please list the charges for which you are doing community service.

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

Signature of Applicant

Date

Parent Signature

Date



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High School Volunteer Checklist

Applicant Name _____

Department _____

- Completed & Signed Volunteer Application
- Completed & Signed Statement of Volunteer Application
 - _____
- Criminal Screen Results
 - Date Confirmed _____ Confirmed by _____
- 3 Documented Reference Checks
 - Acceptable forms of references:
 - Volunteer Recommendation from parent
 - Volunteer recommendation from school
- Child Abuse Prevention Training and Code of Conduct
 - Date Completed: _____
- Completed VSC form (Volunteer Status Change Form)
- PLEASE ATTACH LOCAL BACKGROUND CHECK**

Packet Completed By _____ Date _____

Signature of Executive _____

Required for new volunteers and those returning after a six-month lapse.

Please check all that apply:

Program

Policy

Community Service

Lake Wales Family YMCA High School Volunteer Application

For Office Use:

References

Statement of Applicant

Code of Conduct

Name: _____ E-mail Address _____

Address: _____ City _____ State _____ Zip _____

Home Phone #: _____ Work Phone #: _____

Volunteer Position/ Department Preferred: _____

If desired choice is unavailable, would you be interested in another volunteer position? Yes No

Tell us about any previous volunteer positions you have held:

Organization _____ Volunteer Position _____

Description _____

Organization _____ Volunteer Position _____

Description _____

Times & Days available:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Why do you want to volunteer your time to the YMCA?



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List three personal references:

Name	Address	Phone	YMCA Use:	
			<i>Ref. Check Completed</i>	
			Initials	Date
			Initials	Date
			Initials	Date

Emergency Contact Name _____ Phone _____

I authorize the Lake Wales Family YMCA to collect personal information appropriate to the position applied for concerning my academic background, employment history and to verify the references I have supplied. I also agree I have or will submit information for a criminal background screen.

Signature: _____ Date: _____



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Volunteer Recommendation from School

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Volunteer Name: _____

School Name: _____

How long have you known the applicant? _____ years _____ months

In what capacity have you known this applicant? _____

Would you recommend the applicant to work with children? Yes No

Do you know of any reason why this applicant should not work with children?

Yes No If Yes, please explain: _____

On a scale of 1 to 10, with 10 being the highest, please rate the applicant's moral character in your opinion. (please circle)

1 2 3 4 5 6 7 8 9 10

By signing, I affirm that the above information is accurate and true to the best of my knowledge.

School Official Signature: _____ **Please Affix School Stamp Below**

Print Name: _____

Phone #: _____

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High School Volunteer Status Change

Name: _____

Effective Date: _____ Dept: _____

New Volunteer **Has volunteered for us before**

When: _____

Terminate: Volunteer no longer participating

Seasonal Volunteer

Family Moving

Moving for School

Schedule Conflict

Other: _____

Would Reuse Would Consider Reuse Would Not Reuse

Reason: _____

New Address: _____

Phone: (____) _____

Comments: _____

Supervisor: _____

HR: _____

Director: _____



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