



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YMCA of Darke County Volunteer Application

Thank you for considering the YMCA as a place to donate your time 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 the Darke County 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 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.

Thanks for your cooperation in this effort and your interest in the YMCA. If you have any questions about this or any part of our application process, please contact Jessie Langenkamp, Member Services Director, at 937-548-3777.

Today's Date _____ (Month/Day/Year)

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

Name _____
(Last) (First) (Middle)

Address _____

City _____ State _____ Zip _____

Phone: Day _____ Evening _____

How long have you been at this address? _____

Email Address _____

Social Security Number _____ - _____ - _____

Are you 18 years of age or over?

Yes No (If no, please have your parent or guardian sign the application, too.)

Phone: Day _____ Evening _____



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Based on the association's needs, the YMCA of Darke County offers the following programs, services and activities where volunteer opportunities could exist. Please rank your area of interest (i.e. 1st, 2nd and 3rd).

- | | |
|-----------------------------------|--|
| _____ Health & Wellness | _____ Fitness Classes Instructor |
| _____ Free-Weight Room Attendants | _____ Cardio Room Attendants |
| _____ Aquatics Adult Instructor | _____ Aquatics Instructor/Swim Lessons |
| _____ School Age Child Care | _____ Pre-School Programs |
| _____ Child Watch | _____ Youth Sports Classes/Coaching |
| _____ Teen Ambassador | _____ Youth Activities |
| _____ Welcome Center | _____ YMCA Ambassador |
| _____ Fundraising | _____ Annual Campaign |
| _____ Special Events | _____ Other: _____ |

Location Choice: (circle one) Greenville Facility Versailles Facility

When are you able to volunteer? (Circle all that apply)

- | | | | | | | | |
|-----------|----|-----------|----|----------|----|-----------|----|
| Monday | am | afternoon | pm | Tuesday | am | afternoon | pm |
| Wednesday | am | afternoon | pm | Thursday | am | afternoon | pm |
| Friday | am | afternoon | pm | Saturday | am | afternoon | pm |
| Sunday | am | afternoon | pm | | | | |

How did you learn about volunteer opportunities at the YMCA? _____

Why would you like to volunteer? _____

What other organizations have you volunteered for, if any? _____

Are you a member of the YMCA? _____
(Membership is not required)



Employment History

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

1. _____
 Name of organization _____
 Address _____ City _____ State _____
 Dates of Employment _____ Phone _____
 State job title and describe your work _____

2. _____
 Name of organization _____
 Address _____ City _____ State _____
 Dates of Employment _____ Phone _____
 State job title and describe your work _____

Military History

Branch of service _____ From _____ To _____
 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!)

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



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Other skills (caring for children, languages, etc.) _____

Have you ever been convicted of a criminal offense? Yes No If so, what was it? _____

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 _____

Email Address _____ Telephone _____

Years Known _____ Relationship to You _____

2. Name _____

Email Address _____ Telephone _____

Years Known _____ Relationship to You _____

3. Name _____

Email Address _____ Telephone _____

Years Known _____ Relationship to You _____

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's signature _____ Date _____

(if you're under 18)