

VOLUNTEER APPLICATION AND AGREEMENT

PLEASE READ CAREFULLY BEFORE COMPLETEING THIS APPLICATION

This association does not discriminate in the recruitment and placement of volunteers on the basis of race, color, religion, national origin, sex marital status, disability, age or veteran status. No question on this application is intended to secure information to be used in a discriminatory manner. Your completed application will be reviewed carefully; but its receipt does not imply that you will be utilized. Volunteer consideration necessitates that you meet all conditions required for the position for which you are applying.

**(ANSWER ALL QUESTIONS COMPLETELY.)**

**Please Print Clearly**

Date \_\_\_\_\_ Position Desired \_\_\_\_\_  
 Name \_\_\_\_\_ Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_  
 Residence Address \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 How long at above address? \_\_\_\_\_ Social Security Number \_\_\_\_\_  
 Driver's License Number \_\_\_\_\_ Driver's License Classification: A B C M

List last two previous residential addresses:  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ How long \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ How long \_\_\_\_\_

1. What is your occupation? (Be Specific) \_\_\_\_\_  
 Place of Employment \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ How long? \_\_\_\_\_  
 Previous Employer \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ How long? \_\_\_\_\_  
 Previous Employer \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ How long? \_\_\_\_\_

2. What is your Marital Status?  Married  Single  Divorced

3. How many children do you have (if any)? Sons \_\_\_\_\_ Ages \_\_\_\_\_ Daughters \_\_\_\_\_ Ages \_\_\_\_\_

4. High School attended? \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

5. Describe any formal/informal training you may have had as a coach or volunteer (Coaching Clinic, Courses, P.E. Degree, ect.) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

6. Have you ever been arrested or convicted of any criminal offense?  Yes  No  
 Please exclude the following situations:  
 A.) Minor traffic violation for which the fine was \$200 or less.  
 B.) Any offense which was finally settles in a Juvenile Court or under a Welfare Youth Offender Law.  
 If YES, please explain: \_\_\_\_\_  
 \_\_\_\_\_

***A conviction does not automatically mean you will not be offered a job. What you were convicted of, the circumstances surrounding the conviction and how long ago the conviction occurred are important considerations in determining your eligibility. Give all the facts, so that a fair decision can be made.***

7. What do you hope to gain from volunteering? \_\_\_\_\_

8. List other organizations you have volunteered with (if any)? \_\_\_\_\_

	<b>NAME OF ORGANIZATION</b>	<b>VOLUNTEER POSITION</b>	<b>SUPERVISOR/TELEPHONE #</b>
1			
2			
3			
4			

## **VOLUNTEER CODE OF ETHICS AND RULES**

Smoking or use of tobacco products in the presence of children is prohibited.

Using, possessing, or being under the influence of alcohol or illegal drugs will not be tolerated.

Volunteers shall not abuse children including:

- A. Physical Abuse- strike, spank, shake or slap
- B. Verbal Abuse- humiliate, degrade, threaten
- C. Sexual Abuse- including inappropriate touching or exposure
- D. Mental Abuse

Volunteers must treat children of all races, religions, and cultures with respect and consideration.

Volunteers must use positive techniques of guidance, including positive reinforcement and encouragement rather than competition, comparison or criticism.

Volunteers shall abstain from humiliating or frightening discipline techniques.

Volunteers shall not use profanity in the presence of children or parents.

Volunteers will refrain from intimate displays of affection toward others in the presence of children, parents, and staff.

Monetary and expensive gifts to volunteers are prohibited.

Volunteers must be free of physical and psychological conditions that might adversely affect children's health, including fever or contagious conditions.

Volunteers will portray a positive role model for youth by maintaining an attitude of respect, loyalty, patience, integrity, courtesy, tact and maturity.

Volunteers will do everything in their power to avoid being put in a situation where they are alone with a YMCA child other than their own. In fact, caring for any YMCA child other than their own, on a one-on-one basis such as baby-sitting is prohibited.

Volunteers will not fraternize with YMCA youth participating away from the YMCA. However, if Y volunteers have children that have YMCA participants as friends, the Y volunteer must obtain permission from the YMCA youth participants' parents to fraternize with their children. If the YMCA learns of a violation of this policy, the violation may be grounds for removal as a volunteer.

Texas State law requires that all citizens report any suspected abuse or neglect of a child to the Texas Department of Protective and Regulatory Services and law enforcement agency.

I understand that as a volunteer for the YMCA, I will be subject to a background check, including criminal history.

I have been informed of the YMCA's position regarding child abuse, and have read and understand the portion of my Volunteer Application and Agreement titled "The YMCA's Position on the Nation-Wide Problem of Child Abuse." I understand that in addition to the mandates described in this Volunteer Code of Ethics and Rules, the YMCA will, among other things, conduct a thorough check of the mandates described in this Volunteer Code of

YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREENVILLE TEXAS

Ethics and Rules, the YMCA will, among other things, conduct a thorough check of my background, and conduct periodic interviews/evaluations with children and parents to encourage reports of anything out of the ordinary.

I understand that allegations or suspicions of child abuse are taken by the YMCA and will be reported to the State for investigation and that the YMCA will fully cooperate with any related investigations and will pursue the prosecution of child abusers to its full extent under the laws of this State.

I understand that any violation of this Code may be grounds for removal as a volunteer. Being fully aware of the matters contained in the volunteer Code of Ethics and Rules, I still desire consideration as a volunteer for the YMCA.

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Volunteer's Signature

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Date

**IF VOLUNTEERING TO BE A COACH- Fill out this insert.**

1. What sport have you coached/played: \_\_\_\_\_  
\_\_\_\_\_

2. For which organization: \_\_\_\_\_  
\_\_\_\_\_

3. Do you have an age level preference?: \_\_\_\_\_  
\_\_\_\_\_

4. What areas of coaching do you feel you need training?

- |  |   |
|--|---|
| <input type="checkbox"/> Rules                             | <input type="checkbox"/> Communication with Parents/Players |
| <input type="checkbox"/> Strategy                          | <input type="checkbox"/> Developing sportsmanship           |
| <input type="checkbox"/> Safety                            | <input type="checkbox"/> Injury prevention/treatment        |
| <input type="checkbox"/> First Aid                         | <input type="checkbox"/> Motivating youngsters              |
| <input type="checkbox"/> CPR                               | <input type="checkbox"/> Organizing a practice              |
| <input type="checkbox"/> Warm up and physical conditioning |   |

**YMCA COACHES' CREED**

I pledge myself to uphold the high standards of the YMCA in all my associations with team members, coaches, spectators and opposing teams.

I will exemplify all the principles of good sportsmanship and instill them in the youth under my care. I will not permit any sportsmanship conduct from players or spectators representing the team I am coaching.

I will, by personal example, display the qualities of leadership which will inspire youth to strive toward the goal of good leadership and sportsmanship.

In accordance with YMCA principles, I shall make fair play and good sportsmanship the primary objective of all competition.

My primary aim as a YMCA coach shall be the development of youth, spiritually, mentally, and physically.

I will abide by and uphold the rules and regulations governing athletic contests, as established by the YMCA.

I will, before any athletic contest is started, line up all my team players and coaches together with the officials and recite the YMCA Pledge or a prayer.

I will, after any athletic contest is completed, line up my team facing our opposition and lead them in shaking hands with each member and coach of the opposing team.

I have read the Coaches' Creed and fully agree with the conditions of the creed. I fully understand the team I am coaching is not my team, but is a YMCA team, and I understand that I will be relieved of my duties as a coach if found guilty of any major violation.

\_\_\_\_\_  
Coach's Signature

\_\_\_\_\_  
Date

**PERSONAL REFERENCES (Not Employers)**

List four references. Must include one relative. At least one reference must be a male and one reference a female.

NAME AND HOME ADDRESS	FIRM/NAME/ADDRESS, IF APPLICABLE	PHONE NUMBERS	KNOW IN WHAT CAPACITY? (Friend, pastor, etc.)	HOW LONG KNOWN?
		Day: _____ Eve: _____		
		Day: _____ Eve: _____		
		Day: _____ Eve: _____		
		Day: _____ Eve: _____		

LIST BELOW THE NAMES OF RELATIVES, FRIENDS OR AQUAINTANCES EMPLOYED BY THIS ASSOCIATION AND THEIR RELATIONSHIP TO YOU.

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**VOLUNTEER ACKNOWLEDGEMENT**

\_\_\_\_\_ I have received a copy of the YMCA Volunteer Emergency Procedures and Safety Practices and  
initial have read, understand and agree to abide by those procedures.

\_\_\_\_\_ I understand that I am to immediately report accidents or injuries of myself and participants to the YMCA branch  
initial supervisor.

\_\_\_\_\_ I understand that I am required by law to report known or suspected instances of child abuse and that not doing so  
initial is considered a misdemeanor. Please call 1-800-252-5400 to report suspected abuse to Child Protective Services and notify the Executive Director of your YMCA Branch.

\_\_\_\_\_ I understand that if I use my automobile, I will not be reimbursed by the YMCA and that my personal insurance is my  
initial primary coverage.

\_\_\_\_\_ I understand the policy of the YMCA is to refer all inquiries from the press to the appropriate YMCA staff person.  
Initial

\_\_\_\_\_ I understand the policy of the YMCA is to cooperate with the authorities in the investigation of suspected child  
initial abuse and molestation situations. I, as a volunteer, agree to cooperate with the investigation requested.

Volunteer Signature \_\_\_\_\_ Date \_\_\_\_\_

YMCA Staff Person \_\_\_\_\_ Date \_\_\_\_\_

**THE YMCA'S POSITION ON THE NATION-WIDE PROBLEM OF CHILD ABUSE**

**WE MAKE AN ACTIVE EFFORT TO PREVENT CHILD ABUSE**

Some examples may include, but are not limited to:

- A thorough background check, including but not limited to, references of past employers, personal references, the military, educational institutions, volunteer organizations, civic groups, personal character, health and activities.
- Allegations or suspicions of child abuse are taken seriously and will be reported to the state for investigation.
- Programs are structured so that no staff member is left alone with children.
- Periodic interviews/evaluations with children and parents about day to day experiences, encouraging reports of anything out of the ordinary.
- Staff and volunteers will not fraternize with children outside the programs, including baby-sitting or inviting children home.
- Testing for illegal substances.
- Psychological testing.
- Criminal history records check.

YMCA goals:

- To support and strengthen the family unit.
- To help children develop to their fullest potential
- To deliver the program in a positive YMCA environment of safety, support and care.

***PLEASE READ CAREFULLY BEFORE SIGNING***

I hereby certify that the information provided on this application is accurate to the best of my knowledge and subject to verification by the YMCA. I authorize the schools, persons, previous employers, agencies and other organizations named in this application to provide the YMCA (its authorized employees, agents or representatives) with any relevant information that may be required to arrive at a volunteer placement decision and hereby release any such schools, persons, employers, agencies and organizations from any and all liability which they might otherwise incur as a result. I understand that any misrepresentation or omission of a material fact on my application may be justification for refusal for placement.

I hereby give my permission for the YMCA to obtain information relating to my criminal history record. I understand that this information will be used to determine my eligibility for a volunteer position with this organization. I also understand that as long as I remain a volunteer here, they may repeat this criminal history check at any time.

In the event I volunteer, I understand that all volunteers are subject to dismissal at the discretion of the YMCA. If, in the event I choose to cease volunteering, I am free to do so at any time.

I also understand that, if selected to volunteer, any misrepresentation made by me completing this application shall be considered as sufficient cause for my dismissal without advance notice.

I authorize the YMCA to supply my volunteer record, in whole or in part, and in confidence, to any prospective employer, government agency, or other party, with a legal and proper interest.

In the event of my selection, I will comply with all rules and regulations as set forth by the YMCA. I have read, understand and support the YMCA's position on the problem of child abuse.

I understand that completion of this form does not guarantee me status as a volunteer. I must meet all stated conditions required of the position for which I am asking to be considered.

I have read the above statements and accept the same as a condition of my placement with the YMCA.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date