



Greater Morristown YMCA -- VOLUNTEER APPLICATION

Name _____ Date _____

Address _____

City _____ State _____

Zip _____ Home Phone: _____

Cell Phone _____ Business Phone _____

E-Mail Address: _____

Date of Birth: _____

Occupation: _____

Social Security # _____

Employer: _____

Address: _____

Special professional training, skills, hobbies: _____

Community Affiliations (Clubs, Service Organizations, etc.) _____

Previous Volunteer Experience: _____

Do you have Children in this Program? Yes No If yes, list full name and what level. _____

Special Certifications (i.e. CPR, Medical , etc.) _____

Driver's License # _____ State _____

Have you ever been convicted of or plead guilty to any crime(s): Yes No

If yes, describe each in full: _____

In which In which of the following would you like to participate? (Check one or more)

Coaching Assistant Coach Referee List grades if you wish to coach more than 1 grade _____

Please list 3 references, at least one of which has knowledge of your participation as a volunteer in a program.

Name	Phone
1. _____	_____
2. _____	_____
3. _____	_____

As a condition of volunteering, I give permission for the YMCA organization to conduct a background check on me, which may include a review of sex offender registries, child abuse and criminal history records. I understand that, if appointed, my position is conditional upon the Greater Morristown YMCA receiving no inappropriate information on my background. I hereby, release and agree to hold harmless from liability the YMCA officers, employees, and volunteers thereof, or any other person or organization that may provide such information. I also, understand that regardless of previous appointments, the YMCA is not obliged to appoint me to a volunteer position. I understand I am subject to suspension, and/or removal for violation of the YMCA policies or code of conduct.

Applicants Signature: _____ Date _____

Applicants Name (please print or type) _____

Note: The YMCA will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

YMCA use only:
 Background check completed by _____ on _____
 System used for background check (minimum of one must be checked): Sex Offender Registry
 Criminal History Records Choicepoint*
**Please be advised that if you use Choicepoint and there is a name match in the few states where only name match search can be performed you should notify volunteers that they will receive a letter directly from Choicepoint in compliance with the Fair Credit Reporting Act containing information regarding all the criminal records associated with the name, which may not necessarily be the volunteer.*
 Only attach to this application copies of background check reports that reveal convictions of this applicant.