

DOOR COUNTY YMCA

**Sturgeon Bay
Fish Creek**



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

VOLUNTEER APPLICATION

See how YOU can make a difference!



Dear Friend,

Thank you for your interest in becoming a YMCA volunteer. Your desire to make a difference and give your time and talent back to the community is greatly appreciated.

To the right, you will see our Volunteer Code of Conduct. Please read over this document and sign on the application that you have read it. Because the YMCA is a youth driven organization, all YMCA volunteers must agree to a background check in order to be accepted.

There are many different volunteer opportunities at the YMCA. From annual events like our Triathlon, to Super Kids Fun Nights, to Fundraising, to once a week programs, to summer camps, to swim and gymnastics team; literally thousands and thousands of volunteer hours need to be filled each year.

Thank you again for your interest in youth development, healthy living and social responsibility.

CONTACT INFORMATION

If you have any questions, please contact Volunteer Coordinator, April Clark at 920-743-4949 or e-mail aclark@doorcountyyymca.org

Please return this application to your program center, email to aclark@doorcountyyymca.org, or mail to:

Door County YMCA
1900 Michigan Street
Sturgeon Bay, WI 54235

Volunteer Code of Conduct

1. Volunteers must adhere to the YMCA Four Core Values of Respect, Responsibility, Caring, and Honesty.
2. Volunteers must portray a positive role model by maintaining a positive attitude of respect, patience, encouragement, integrity, courtesy, and maturity.
3. At no time during a YMCA program may a volunteer be alone with a single child where they cannot be observed by other adults.
4. Volunteers shall never leave a child involved with their program unsupervised.
5. Volunteers should appear clean, neat, and appropriately dressed.
6. Volunteers are not to transport children in their own vehicles.
7. Volunteers must treat all program participants of all races, religions, cultures, ages, genders, sexual orientations, and backgrounds with the same respect and consideration.
8. Volunteers may not smoke or use tobacco products during YMCA events and activities.
9. Using, possessing, or being under the influence of alcohol or illegal drugs during YMCA activities is strictly prohibited.
10. Profanity, inappropriate jokes/gestures, intimate displays of affection towards others are prohibited.
11. Volunteers must use positive techniques of guidance, including positive reinforcement and encouragement, rather than comparison and criticism. Volunteers should abstain from humiliating or frightening types of disciplinary actions.
12. Volunteers will refrain from any action that could be considered child or elder abuse including:
 - a. Physical Abuse: spanking, slapping, striking, intimidating
 - b. Verbal Abuse: humiliating, degrading, making threats
 - c. Sexual Abuse: inappropriate gesturing, touching, language
 - d. Mental Abuse: neglecting, shaming, cruelty, put downs

Door County YMCA Mission Statement

To put Christian principles into practice through programs that build healthy spirit, mind, and body for all.

Please keep this page for your reference.

APPLICANT INFORMATION

Please fill out ENTIRE application in ink.

Last Name	First Name	Middle Initial	Phone Number(s)
Address			Email
City	State	Zip	Preferred method of contact: <u>phone</u> or <u>email</u>
At which branch would you like to volunteer? ___ Sturgeon Bay ___ Northern Door ___ Any Location			Can we put you on our volunteer e-mail list? ___ Yes ___ No
Are you at least 18 years old? ___ Yes ___ No			<u>Emergency Contact Person:</u>
Volunteers under 18 years of age will need their guardian to sign this application.			Phone Number(s):
			Relationship:
Are you looking to fulfill a school requirement for your service? ___ Yes ___ No			
If yes, what school? _____ Number of Hours Needed: _____ Deadline: _____			
Is this for court-ordered community service? ___ Yes ___ No Number of Hours Needed: _____ Deadline: _____			
Please explain offense or attach paperwork:			
Why are you interested in volunteering at the Y?			
How did you hear about volunteering with us?			

ASSIGNMENT PREFERENCES

Please indicate your availability and interests.

Specific days/times that work best for you:	<u>Which program areas interest you?</u>	<u>Please check specific interests.</u>
List specific skills, hobbies, or interests you would like to share with the Y. (crafts, gardening, etc.) Is there something specific you'd love to volunteer for?	<input type="checkbox"/> Anything/Everything <input type="checkbox"/> Aquatics <input type="checkbox"/> Building & Grounds <input type="checkbox"/> Child Care/Afterschool Care <input type="checkbox"/> Family <input type="checkbox"/> Financial Development <input type="checkbox"/> Land Fitness <input type="checkbox"/> Office Work <input type="checkbox"/> Older Adult <input type="checkbox"/> Special Events <input type="checkbox"/> Summer Camp <input type="checkbox"/> Teens/Youth <input type="checkbox"/> Youth Sports	<input type="checkbox"/> Fitness Runs <input type="checkbox"/> Super Kid Fun Nights/ Family Nights <input type="checkbox"/> Halloween Party (October) <input type="checkbox"/> Healthy Kids Day (April) <input type="checkbox"/> Summer Foods (M-F June to Aug 11:15-12:45pm) <input type="checkbox"/> Annual Campaign Events <input type="checkbox"/> Bulk Mailing <input type="checkbox"/> Door County Triathlon (July) <input type="checkbox"/> Fitness/Swim Instructor <input type="checkbox"/> DCY Swim Team <input type="checkbox"/> Gymnastics Team <input type="checkbox"/> Peer Mentor (teens)
Notes/comments:		

VOLUNTEER HISTORY

Name of Organization /Location	Dates	Responsibilities

EMPLOYMENT / EDUCATION

Current Employer:	Position/Title:	# of years:
May we contact your employer as a reference? ___ Yes ___ No		
If "yes"... Supervisor:	Supervisor Phone:	
Highest Level of Education:	Course of Study:	
Special Certifications/Skills:		
List any other previous experiences that would relate to volunteering at the YMCA:		

PROFESSIONAL / PERSONAL REFERENCES (Please don't use immediate family members.)

Reference # 1	Title
Address	Phone
	Email
Relationship	How long known?
Reference # 2	Title
Address	Phone
	Email
Relationship	How long known?
Reference # 3	Title
Address	Phone
	Email
Relationship	How long known?

APPLICATION SIGNATURE

Please read carefully and sign.

If under 18, the signature of your parent/guardian is required.

1. All information contained in this application is true and correct to the best of my knowledge. I understand that misrepresentations or omissions of any kind may result in denial of volunteer service or be cause for subsequent dismissal if I am chosen for a volunteer assignment.
2. My services are donated to the Door County YMCA freely and without expectation of compensation or benefits. I understand that this application is not a contract and that volunteering at the YMCA is on an at-will basis, and that my volunteer service may be terminated with or without cause by me or the YMCA at any time.
3. I have read and fully understand the Door County YMCA's Volunteer Code of Conduct and agree to abide by it during all YMCA activities. I understand that failure to follow the Volunteer Code of Conduct may be cause for my dismissal at any time. During my service, I understand that I may never be alone with a single child where we cannot be observed by other adults. In addition, I understand that no type of child or elder abuse will be tolerated and would be cause for immediate dismissal.
4. **Background Check Authorization – Background Check is mandatory for all volunteers over the age of 18.**
I understand that if my Volunteer Application is approved, background check documents and release forms will be given to me separate from my application, including the document titled, "A Summary of Your Rights Under the Fair Credit Reporting Act." The purpose of this authorization is to assist the YMCA in getting to know me and to determine the best volunteer placement. The disclosure of the past civil/criminal information will be evaluated on an individual basis; relative to the type of service the individual is offering the YMCA. All information will be maintained in strict confidence and stored in secured files.

Signature _____ **Date** _____

BACKGROUND CHECK

Have you ever been charged with a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you currently registered with Corrections Services & Parole? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain:		
Where:	When:	

Upon Volunteer Application Approval:

Volunteers approved by this application are accepted, contingent upon a satisfactory background check.
(Background check is only required for those over 18 years of age.)

If you are approved to volunteer based on this Volunteer Application, you will be contacted to complete the appropriate Background Check Release Forms. Should you fail to complete the Background Check Release Forms, you will be disqualified from volunteer service with the Door County YCMA.

How would you like to complete your Background Check Release Forms if approved?

Email me an electronic copy to fill out. **Or** **Mail me a paper copy to fill out.**