



# Kandiyohi County Area Family YMCA VOLUNTEER APPLICATION

## Purpose of YMCA Volunteers:

YMCA volunteers help to contribute to the mission of the YMCA, enhance the quality of programs and provide vision for the future of the association.

## YMCA Volunteer Opportunities:

- CHILD CARE CENTER
- WELCOME CENTER
- HEALTH & WELLNESS
- YOUTH SPORTS
- OFFICE SUPPORT
- SCHOOL AGE CHILD CARE
- SPECIAL EVENTS
- MAINTENANCE

*\*This list includes common volunteer jobs, however, check with staff regarding other program opportunities.*

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address, City, Zip \_\_\_\_\_

Volunteer Options of Interest \_\_\_\_\_

Today's Date \_\_\_\_\_ Date Available to Start \_\_\_\_\_

List previous experiences / training / education related to volunteer option of interest:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## References:

Name \_\_\_\_\_ Phone# \_\_\_\_\_ Years Acquainted \_\_\_\_\_

Name \_\_\_\_\_ Phone# \_\_\_\_\_ Years Acquainted \_\_\_\_\_

Name \_\_\_\_\_ Phone# \_\_\_\_\_ Years Acquainted \_\_\_\_\_

Name (Relative) \_\_\_\_\_ Phone# \_\_\_\_\_ Years Acquainted \_\_\_\_\_

## Current Employer:

Name of Employer \_\_\_\_\_ How long employed \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Position Held \_\_\_\_\_

May we contact?  Yes  No Phone # \_\_\_\_\_

## \*Criminal History Checks Required of all YMCA Volunteers\*

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts is cause for dismissal. I acknowledge that I will not receive any direct compensation for my volunteer service. I authorize the YMCA to conduct a criminal history background check.

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