

YMCA of the Silicon Valley
Volunteer Hire Checklist

Volunteer Name _____ Hire Date _____ Branch _____

Volunteer FILE (send all to Human Resources)

- Volunteer Application
- If under 18, Complete the Minor Consent Form and send with Live Scan Form
- Live Scan Form (do not keep a copy at the branch)
- Privacy Consent Sign Off (do not keep a copy at the branch)
- Two Verified References _____
- Volunteer Agreement _____
- Volunteer Handbook Given to Volunteer _____

↑ All information above the line is MANDATORY ↑

.....

- Voluntary Self-Identification Form _____
- Signed Liability Waiver (not optional for Level 2 volunteers)
- Signed Job Description _____
- Résumé _____
- Certifications & Dates (if necessary) _____
 - A. YMCA Certifications _____
 - B. Lifeguard Certifications _____
 - C. W.S.I. Certification _____
 - D. CPR/AED Training _____
 - E. First Aid Training _____
 - F. Life Saving _____



YMCA of Silicon Valley

We build strong kids,
strong families, strong communities.

Volunteers

YMCA of Silicon Valley Volunteer Application

- | | | |
|---|-------------------------------------|--|
| <input type="checkbox"/> Association Office | <input type="checkbox"/> El Camino | <input type="checkbox"/> Redwoods |
| <input type="checkbox"/> Central | <input type="checkbox"/> Mt Madonna | <input type="checkbox"/> Sequoia |
| <input type="checkbox"/> Camp Campbell | <input type="checkbox"/> Northwest | <input type="checkbox"/> South Valley |
| <input type="checkbox"/> East Palo Alto | <input type="checkbox"/> Page Mill | <input type="checkbox"/> Southwest |
| <input type="checkbox"/> East Valley | <input type="checkbox"/> Palo Alto | <input type="checkbox"/> Wellness Center |

Personal Information

Name _____ Today's Date _____

Address _____ City _____ State _____ Zip _____

E-mail _____ Home Phone () _____ Work Phone () _____

Volunteer Interests (*check all that apply*):

- | | | |
|--|---|--|
| <input type="checkbox"/> Aerobics Instructor | <input type="checkbox"/> Camp | <input type="checkbox"/> Board Committee |
| <input type="checkbox"/> Youth Sports | <input type="checkbox"/> Service Desk | <input type="checkbox"/> Board Member |
| <input type="checkbox"/> Maintenance | <input type="checkbox"/> Office | <input type="checkbox"/> Youth Programs |
| <input type="checkbox"/> Aquatics | <input type="checkbox"/> Fund Raising Volunteer | <input type="checkbox"/> Other: _____ |

Volunteer Service Required? Yes No Number hours needed? _____

Are you a YMCA member? Yes No If yes, what branch? _____

Have you been staff/volunteer for another Y? Yes No If yes, what branch? _____

Availability

Please indicate the days and hours you are available:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Comments _____

Emergency Contact Information

Name _____ Relationship _____

Address _____ City _____ State _____ Zip _____

E-mail _____ Home Phone () _____ Work Phone () _____

References

Name _____ Phone () _____

E-mail _____

How long has this person known you? _____ Relationship to you _____

Name _____ Phone () _____

E-mail _____

How long has this person known you? _____ Relationship to you _____

Current Employment (optional)

Please list your current employer:

Company/Organization _____ Position _____

Supervisor _____ Phone () _____

May we contact them? Yes No

What skills do you use at work? _____

Volunteer Information (optional)

Please list current or previous volunteer experience:

Organization _____ Position _____

Supervisor _____ Phone () _____

Types of services offered by organization? _____

Days of Volunteering _____ May we contact them? Yes No

I am certified in: CPR Type _____ Expires on _____

First Aid Type _____ Expires on _____

Lifeguard Type _____ Expires on _____

Have you ever been convicted of a criminal offense within the last seven years (felony or misdemeanor)? Yes No

Note: This does not include convictions related to marijuana offenses that occurred two or more years before the date of application. Also, do not include convictions that were sealed, eradicated or expunged, or convictions that resulted in referral to a diversion program. Conviction of a crime will not necessarily disqualify you from employment. Factors such as the age and time of the offense, seriousness and nature of the violation, and rehabilitation will be considered when making any employment decisions. *If your answer is "yes," please explain on a separate piece of paper the circumstances surrounding such offense including place, date, name of court, etc. and attach it to this application.*

Have you ever been arrested for any criminal violation for which you are currently out on bail, out on your own recognizance or otherwise on release pending trial? Yes No

If YES, state the crime you are charged with, the date of arrest and the court before which the action is pending. Such an arrest will not necessarily disqualify an applicant from employment. _____

Are you a registered sex offender? Yes No

Are you able to perform the essential functions of the job for which you are applying with or without reasonable accommodations? Yes No

If No, please attach a description of the functions that cannot be performed. In accordance with the Americans with Disabilities Act (ADA), the YMCA seeks reasonable accommodation measures for applicants/employees to perform essential functions.

Applicant's Certification and Agreement (Initial each section and sign below)

_____ I certify that the statements made by me in this application are true, complete and correct to the best of my knowledge and belief, and are made in good faith. I understand that falsification, misrepresentation, or omission of facts called for by this application could result in immediate dismissal as a volunteer.

_____ I authorize YMCA of Silicon Valley the right to contact and obtain information from all references, employers, educational institutions, and law enforcement agencies, and otherwise verify the accuracy of the information contained in this application. I hereby release from liability the YMCA of Silicon Valley and its representative from seeking, gathering and using such information and all other person, corporation or organization from furnishing and disclosing information.

_____ If I become a volunteer, I understand that I am free to resign at any time and my volunteer employer reserves the same right to end my volunteer position.

_____ I understand and agree that this application does not constitute a contract for volunteer time for any definite duration. The length time hinges on the quality of the job that I do as a volunteer.

_____ I understand and agree that as a volunteer I will be fingerprinted.

I represent and warrant that I have read and fully understand the foregoing and seek to volunteer under these conditions.

Volunteer's signature _____ Date: _____

Parent/Guardian signature (if under 18) _____ Date: _____



**YMCA of the Silicon Valley
Volunteer Minor Consent Form**

Parent/Legal Guardian Consent Form

This form is for volunteers who are under the age of 18

I understand my son or daughter will be volunteering for the YMCA of Silicon Valley. As a condition of employment or becoming a volunteer, I give permission for s/he to be fingerprinted.

I (the minor) am a Volunteer

Name of volunteer

Date

This section must be filled out and accompany the Request for Live Scan form in order for the minor to be fingerprinted.

Name of Parent/Legal Guardian (please print)

Date

Signature of Parent/Legal Guardian

Date

Request for Live Scan Service

Supervisor requesting service: _____

ORI: A7607	Type of Application: I am a <input checked="" type="checkbox"/> Volunteer at:
<input type="checkbox"/> Central <input type="checkbox"/> East Palo Alto <input type="checkbox"/> East Valley <input type="checkbox"/> El Camino <input type="checkbox"/> Mt Madonna <input type="checkbox"/> Northwest <input type="checkbox"/> Page Mill <input type="checkbox"/> Palo Alto <input type="checkbox"/> Sequoia <input type="checkbox"/> South Valley <input type="checkbox"/> Southwest <input type="checkbox"/> AO <input type="checkbox"/> Camp Campbell <input type="checkbox"/> CRC	
Job title or type of license, certification or permit: _____	

Agency Address Set Contributing Agency

YMCA of Silicon Valley Agency authorized to receive criminal history information	00045 Mail code
1922 The Alameda, 3rd Floor Street No. Street or PO Box	Andrea Garcia Contact name (mandatory for all school submissions)
San Jose, CA 95126 City, State, Zip	(408) 351-6427 Contact telephone no.

Applicant (after being fingerprinted, return this form to your branch)

Name of applicant: _____
Last, First, Middle Initial

Alias: _____ **Driver's License No:** _____
Last, First

Date of Birth: _____ **Gender:** Female Male Misc. No. Bil- **144534**
Month/Day/Year

Height: _____ **Weight:** _____ **Home Address:** _____
Eye Color: _____ **Hair color:** _____
Street No Street or PO Box

Place of birth: _____
City, State and Zip

Social Security Number: _____

Your Number: _____ OCA No. (Agency Identifying No.)	Level of Service: <input checked="" type="checkbox"/> DOJ <input type="checkbox"/> FBI
If resubmission, list original ATI Number: _____	

Employer (additional response for agencies specified by statute)

YMCA of Silicon Valley Agency authorized to receive criminal history information	00045 Mail code
1922 The Alameda, 3rd Floor Street No. Street or PO Box	Andrea Garcia Contact name (mandatory for all school submissions)
San Jose, CA 95126 City, State, Zip	(408) 351-6427 Contact telephone no.

Live Scan Transaction completed by:	_____ Name of operator	_____ Date
_____ Transmitting Agency	_____ ATI No.	_____ Amount collected/billed

YMCA of Silicon Valley
Privacy Consent Form

**NOTICE AND CONSENT CONCERNING CONSUMER AND
INVESTIGATIVE CONSUMER REPORTS**

The YMCA of Silicon Valley may request consumer reports or investigative consumer reports in connection with your volunteer employment application, or during the course of your volunteer employment with the YMCA of Silicon Valley, or for other volunteer related purposes.

The types of reports that may be requested from consumer reporting agencies under this policy include, but are not limited to, credit reports, criminal records checks, court records checks, driving records, and/or summaries of educational and employment records and histories. If applying for a position where you may supervise, discipline or care for minors, this information may include criminal and arrest records, and you may be required to submit fingerprints in a manner required by the YMCA of Silicon Valley. The information contained in these reports may be obtained by a consumer reporting agency, from public record sources or through personal interviews with your co-workers, neighbors, friends, associates, current or former employers, or other personal acquaintances. Any information contained in such reports may be taken into consideration in evaluating your suitability for employment, promotion, reassignment or retention.

CONSENT STATEMENT

I have carefully read and understand this notice and consent form and confirm that all such information is true and correct. By my signature below, I consent to the release of consumer or investigative consumer reports, as defined above, to the YMCA of Silicon Valley (1) in conjunction with my application for volunteer employment, and (2) during the course of my volunteer employment, if any. I further understand that this consent will apply during the course of my volunteer employment with the YMCA of Silicon Valley. I understand and agree that this consent will remain in effect indefinitely. I further understand that any and all information contained in my employment application or otherwise disclosed to the YMCA of Silicon Valley by me may be utilized for the purpose of obtaining the consumer reports or investigative consumer reports requested by the YMCA of Silicon Valley. I understand and acknowledge that nothing in the Notice and Consent is to be, or is, an offer of employment or a promise of continued employment. I further understand that my volunteer employment with the YMCA is "at will," meaning that either I or the YMCA may terminate the employment relationship at any time for any reason, with or without cause or notice.

By Checking this box and returning the original of this letter to the YMCA of Silicon Valley Human Resources Department, I request a copy of any "consumer (credit-related) report" obtained by the YMCA of Silicon Valley from any consumer reporting agency, at no extra charge, and understand that a copy of the report will be provided to me by the consumer reporting agency at the same time the report is provided to the YMCA of Silicon Valley.

Name (Please Print)

Signature

Branch and Position

Date

YMCA OF SILICON VALLEY
VOLUNTEER REFERENCE CHECK FORM

Note: This form is to be used to contact two **references on level 3 & 4** volunteers PRIOR to beginning work.

Hello, I am _____ with the YMCA. _____ Has given us
Your name *Volunteer Name*
 your name as a reference to verify his/her ability to volunteer for the YMCA.

_____ will be working as a _____.
Volunteer Name *Position Name*

Volunteer's Name: _____ **Name of Staff Calling** _____

Info Needed	Reference #1	Reference #2
Reference's Name		
Telephone # / E-mail		
(date information is gotten) Today's Date		
How long have you known the applicant		
In what capacity? (friend, co-worker, etc.)		
Have you observed him/her working with children?		
If yes, what type of activity?		
Do you have any concerns about the applicant being appropriate with youth?		
Would you say the volunteer is reliable and fulfills commitments? (ask for example)		
What are the applicant's strengths?		
What are the applicant's growth areas?		
Do you have any other comments you would like to share that will assist us in making a decision?		

Thank you!

Please keep this on file

5/22/2009



YMCA of Silicon Valley

Volunteer Agreement

As a YMCA volunteer, I agree that:

I will volunteer as a _____ in the _____
beginning _____ and ending _____ under the supervision of _____

I agree to work the following schedule: [] Every week [] Other: _____

Table with 7 columns: Monday, Tuesday, Wednesday, Thursday, Friday, Saturday, Sunday

Please read and initial next to the following statements:

- I understand the YMCA does not barter volunteer jobs in exchange for free/discounted memberships/programs.
My services are donated to the YMCA without contemplation of future employment and are freely given for a time period mutually agreed upon between me and the YMCA.
I will hold confidential all information concerning members, program participants, volunteers and staff.
I will inform my supervisor as soon as possible if I am going to be absent.
I will uphold the mission, philosophy, standards, policies and values of the YMCA.
I understand that YMCA may terminate my volunteer status for reasons including, but not limited to:
1) Misconduct 2) Unacceptable performance 3) Excessive absenteeism 4) Other circumstances which are contrary to the best interests of the YMCA

For Minors Ages 12-17 Only

- I understand that all minors' ages 12-17 who have not graduated are required to attend school a minimum of 4 hours per wk.
I understand that the following are the maximum number of hours per day and per week that a minor ages 12-17 can work:
Age Non-school days School days
12-13 8/day & 40/week 0/day & 0/week
14-15 8/day & 40/week 3/day & 18/week
16-17 8/day & 48/week 4/day & 48/week
I understand that all volunteer rules applicable to other volunteers of the YMCA of Silicon Valley also apply to minors.
I understand that a day of rest from volunteering is required if I volunteer more than 30 hours per week or more than 6 hours on any one day during the week.
I understand that my volunteer work must be performed between the following hours:
Age Hours Exceptions
12-13 7:00am-7:00pm Not between June 1st - Labor Day
14-15 7:00am-9:00pm Same as 12-13
16-17 5:00am-10:00pm Until 12:30am when no school the next day

I have read the foregoing policies and conditions, and I agree to them.

Volunteer Name (Printed) Volunteer's Signature Date
Name of parent or guardian (if under 18 yrs) Parent/guardian signature (if under 18 yrs) Date
Supervisor's Signature Date Phone Number Email

