



**FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY**

## **Volunteer Application**

### **YMCA OF GREATER WILLIAMSON COUNTY**

Thank you for considering the YMCA as a place to donate your time and talents. Volunteers are vital to the YMCA. Without them, we wouldn't be able to meet the needs of the kids, families, and adults who live in Greater Williamson County and surrounding areas.

At the YMCA, we know that your time and talent are precious, and we want every minute you spend with us to be worthwhile. That's why we're asking you to take a few minutes to fill out this application. It will help us begin to make the right match between your skills and interests and the opportunities available.

You will find questions on this form about your background, former residences, places of employment, and so on. We hope you'll understand that, unfortunately, there are a few people who apply for volunteer jobs at the YMCA for the wrong reasons. The YMCA, however, makes an active effort to prevent abuse. So even though we may know you well, we reserve the right to conduct background and reference checks on all volunteers. It's just one of the many ways we help protect children and other vulnerable people served by the YMCA.

Thanks for your cooperation in this effort and your interest in the YMCA. Please call 512.615.5549 with questions.

- **IMPORTANT NOTE: The Y does not participate in sponsoring Community Service Hours**
- **All applicants must submit a copy of the front of your driver's license and your social security number with this application**
- **Application and background checks must be completed before any individual may become a volunteer at our Association**
- **You may submit your volunteer application to any of our branches or mail it to:**

**YMCA of Greater Williamson County  
PO Box 819  
Round Rock, TX 78680**

**I am interested in volunteering at the following Branch location:**

- CHASCO     Twin Lakes     Hutto     Burnet     Camp Twin Lakes

**For office use only:**  Copy of DL     Social Security Number

Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Volunteer position: \_\_\_\_\_

Comments: \_\_\_\_\_

Today's Date \_\_\_\_\_ (Month/Day/Year)

Mr.    Mrs.    Miss    Ms.    Rev.    Dr.    Other

Name \_\_\_\_\_  
(Last) (First) (Middle)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Day \_\_\_\_\_ Evening \_\_\_\_\_

How long have you been at this address? \_\_\_\_\_

Are you 18 years of age or over?

Yes    No (If no, please have your parent or guardian sign the application, too.)

**Emergency Contact**

Name \_\_\_\_\_  
(Last) (First) (Middle)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Day \_\_\_\_\_ Evening \_\_\_\_\_

**Interests**

How did you learn about volunteer opportunities at the YMCA? \_\_\_\_\_

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

Why would you like to volunteer? \_\_\_\_\_

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

Have you heard about any particular volunteer opportunities that interest you? \_\_\_\_\_

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

Would you like to talk to someone further about what kinds of  
volunteer opportunities might match your skills, talents, and interests? \_\_\_\_\_

\_\_\_\_\_

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Are there any particular skills, talents, or interests you'd like to share? \_\_\_\_\_

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What other organizations have you volunteered for, if any? \_\_\_\_\_

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Are you a member of the YMCA? \_\_\_\_\_  
(Membership is not required)

**Residences**

Please list your last two addresses (excluding your current address) starting with the most recent:

1. Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

From when to when? \_\_\_\_\_ (include month and year)

2. Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

From when to when? \_\_\_\_\_ (include month and year)

**Employment History**

Please list your last three employers, starting with the most recent:

1. \_\_\_\_\_

Name of organization

Employed from when to when? \_\_\_\_\_ (include month and year)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

State job title and describe your work \_\_\_\_\_

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Name and title of immediate supervisor \_\_\_\_\_

2. \_\_\_\_\_  
 Name of organization \_\_\_\_\_

Employed from when to when? \_\_\_\_\_ (include month and year)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

State job title and describe your work \_\_\_\_\_  
 \_\_\_\_\_

Name and title of immediate supervisor \_\_\_\_\_

3. \_\_\_\_\_  
 Name of organization \_\_\_\_\_

Employed from when to when? \_\_\_\_\_ (include month and year)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

State job title and describe your work \_\_\_\_\_  
 \_\_\_\_\_

Name and title of immediate supervisor \_\_\_\_\_

**Military History**

Date of entry \_\_\_\_\_ Date of discharge \_\_\_\_\_

Branch of service \_\_\_\_\_ Type of discharge \_\_\_\_\_

Final rank \_\_\_\_\_

Did you attend service school or receive special training? \_\_\_\_\_

**Education Note:** Formal education is not required to be a volunteer. We welcome experience of all kinds!

	Name and Location	Course of Study	Start and End Dates	Did You Graduate?	Degree or Diploma
High School					
Trade or Business					
College					
Other					

**Other skills** (caring for children, languages, etc.) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Background**

Please list here any other names you may have used in the past: \_\_\_\_\_

Driver's license number \_\_\_\_\_ Driver's license classification \_\_\_\_\_

**References**

Please list three people besides relatives and employers whom you have known for at least two years and who know you well enough to provide us with a reference.

1. Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_ Relationship to you \_\_\_\_\_

How long have you known this reference \_\_\_\_\_

2. Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_ Relationship to you \_\_\_\_\_

How long have you known this reference \_\_\_\_\_

3. Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_ Relationship to you \_\_\_\_\_

How long have you known this reference \_\_\_\_\_

Please list the names of relatives, friends, or acquaintances employed by the YMCA and their relationship to you.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**\*\*PLEASE READ CAREFULLY BEFORE SIGNING\*\***

I understand that the YMCA reserves the right to conduct background and reference checks on all volunteers, in an effort to protect children and other vulnerable people served by the YMCA.

- Volunteers will serve in areas of identified need and will perform duties assigned based on areas of need
- Volunteers will comply with all policies and procedures of the YMCA, as well as directives and instructions from YMCA staff
- All applicants must submit a copy of the front of their unexpired driver's license and their social security number must be provided within the application; email addresses are also required as part of the required background check
- Application and background checks must be completed and approved by the Human Resources department before any individual may become a volunteer at our Association

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 YMCA, its affiliates, and their representatives to investigate all information given and to secure additional criminal, personal, and job-related information. This information may include, but is not limited to, verification of previous employment, personal and employment references, verification of education, and criminal reports. I understand that this information may be used to determine my eligibility as a volunteer and that any false information or omission of facts on this application will result in the rejection of my application or would be sufficient grounds to discharge me from the YMCA's volunteer program.

I hereby authorize the release of any information in regard to checking my background, criminal history, and verifying my employment, education, and personal references and give permission to the Y to repeat any and all of the above requirements at any time. In the event that I volunteer, ***I understand that all volunteers are subject to dismissal at the discretion of the Y and if I choose to cease volunteering, I am able to do so at any time.*** I will make every effort to give a minimum of two weeks' notice.

I also understand that the completion of this application does not guarantee me a volunteer position and agree that any documents signed during any previous volunteer activities with this association are still valid. These include, but may not be limited to, authorizations to verify previous employment or applicable personal records, releases of liability, agreements of understanding and adherence to association policies, and statements of understanding on previous applications. I understand that I must comply with all policies and procedures of the YMCA as well as any directives from YMCA staff; failure to comply will result in removal from the volunteer program.

## **NOTICE AND AUTHORIZATION CONCERNING CONSUMER AND INVESTIGATIVE CONSUMER REPORTS**

This form, which you should read carefully, has been provided to you because the YMCA of Greater Williamson County may request consumer reports or investigative consumer reports in connection with your application for employment/volunteer/contract position, or at any time during the course of your employment/volunteer/contract position with the YMCA, if any, for purposes of evaluating your suitability for employment/volunteer/contract position, promotion, reassignment or retention as an employee/volunteer/contractor. Additionally, in the event that claims or disputes between you and the YMCA are filed with any third parties, the YMCA may request consumer reports or investigative consumer reports for purposes of evaluation and response, regardless of whether you remain in the employment/volunteer/contract position of the YMCA at the time such claims or disputes arise.

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. 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.

## **AUTHORIZATION FOR BACKGROUND CHECK**

I have carefully read and understand this notice and authorization form and, by my signature below, I consent to the release of consumer or investigative consumer reports, as defined above, to the YMCA (1) in conjunction with my application for employment/volunteer/contract position, (2) during the entire course of my employment/volunteer/contract position, if any, and (3) after any such employment/volunteer/contract position ends. I further understand that any and all information contained in my application or otherwise disclosed to the YMCA by me before, during or after my employment/volunteer/contract position, if any, may be utilized for the purpose of obtaining the consumer reports or investigative consumer reports requested by the YMCA and I confirm that all such

information provided in connection with my application is true and correct. I understand and acknowledge that nothing in this notice and authorization is intended to be, or is, an offer of employment or a promise of continued employment.

**We make every effort to prevent child abuse through, but not limited to the following:**

- A thorough background check, which may include, but is not limited to, criminal history records, references of past employers, personal references, educational institutions, volunteers organizations, civic groups, and/or personal character.
- Allegations or suspicions of child abuse are taken seriously and will be reported to the Texas Department of Family and Protective Services.
- Programs are structured so that no staff member, paid or unpaid, 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 program, including babysitting, inviting children home or contact/communicating via social media.

**AGREEMENT FOR PARTICIPATION IN VOLUNTEER ACTIVITY**

**NOTICE:** THIS DOCUMENT HAS IMPORTANT LEGAL CONSEQUENCES, INCLUDING A RELEASE OF LIABILITY FOR INJURIES SUFFERED DURING THE ACTIVITY, AND AN AGREEMENT TO INDEMNIFY YMCA OF GREATER WILLIAMSON COUNTY FOR CLAIMS ASSERTED AS A RESULT OF SUCH INJURIES. IF YOU HAVE ANY QUESTIONS REGARDING THE EFFECT OF THIS RELEASE YOU ARE ENCOURAGED TO CONSULT LEGAL COUNSEL.

As consideration for YMCA of Greater Williamson County ("YMCA") allowing me to enter premises owned by the YMCA of Greater Williamson County and participate in the volunteer activity assigned, I certify and agree to the following:

I certify that I have been informed that the YMCA does not have any insurance that would provide any benefits to me should I be injured while engaging in the volunteer activities. Furthermore, I agree to obey all policies, rules, and regulations applicable to any visitors and volunteers to property owned by YMCA, and to obey any additional instructions provided by employees or other representative of the YMCA during my participation in volunteer activities.

As further consideration for YMCA allowing me to enter premises owned by the YMCA and assist in the activity identified below, I HEREBY RELEASE THE YMCA FROM LIABILITY FOR ANY AND ALL CLAIMS OR CAUSES OF ACTION FOR ANY AND ALL PERSONAL INJURY OR PROPERTY DAMAGE ALLEGED TO HAVE BEEN SUFFERED AS THE RESULT OF MY PARTICIPATION IN THE VOLUNTEER ACTIVITY. THIS RELEASE EXPRESSLY EXTENDS TO ALL CLAIMS OR CAUSES OF ACTION OF ANY ORIGIN, INCLUDING THOSE ARISING AS A RESULT OF THE NEGLIGENCE OF THE YMCA OR ANY OTHER PERSON OR ENTITY, WHETHER BY ACT OR OMISSION. I FURTHER AGREE AND COVENANT TO NOT SUE THE YMCA FOR SUCH CLAIMS OR CAUSES OF ACTION.

I FURTHER AGREE TO INDEMNIFY AND HOLD HARMLESS YMCA FROM ANY DAMAGES OR LOSS ARISING FROM (1) ANY CLAIM OR CAUSE OF ACTION FOR PERSONAL INJURY OR PROPERTY DAMAGE ASSERTED BY ME; (2) ANY FAILURE BY ME TO COMPLY WITH THE RULES AND REGULATIONS REGARDING THE USE OF THE PREMISES; AND, (3) ANY MISREPRESENTATION BY MYSELF, WHETHER INTENTIONAL OR NEGLIGENT, ARISING FROM MY CERTIFICATIONS HEREIN. THIS AGREEMENT TO INDEMNIFY EXPRESSLY EXTENDS TO ALL CLAIMS OR CAUSES OF ACTION OF ANY ORIGIN, INCLUDING THOSE ARISING AS A RESULT OF THE NEGLIGENCE OF THE YMCA, WHETHER BY ACT OR OMISSION.

I understand, acknowledge and agree that the term "YMCA" as used in this Agreement and the release and indemnification set out in the Agreement includes the YMCA's trustees, employees, agents, and representatives of every type or description, all both in their official and in their individual capacities.

**Volunteers are not cleared to volunteer until authorized by the Human Resources department.**

Your signature \_\_\_\_\_

Date \_\_\_\_\_

Parent's or guardian's signature \_\_\_\_\_  
(if you're under 18)

Date \_\_\_\_\_

We are an Equal Opportunity Employer and do not discriminate on the basis of race, color, religion, sex, age, national origin, disability, veteran status, sexual orientation or any other classification protected by Federal, State or local law. The information below will be used for reporting purposes only. Completion of this data is voluntary and will not affect your opportunity for volunteering, or terms or conditions of volunteering.

**Gender:**

Male

Female

**Ethnic Status:**

White

American Indian

African American

Hispanic

Asian or Pacific Islander



# YMCA BACKGROUND INVESTIGATION CONSENT FORM

## YMCA OF GREATER WILLIAMSON COUNTY

Please complete this form truthfully and completely as part of your required background verification for employment or volunteer services with the YMCA of Greater Williamson County.

**Please print legibly** in order for your application to be processed in a timely manner.

Complete Legal Name: \_\_\_\_\_

First

Middle

Last

Any Other/Former Last Names used: \_\_\_\_\_ "Nick" Names: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_ YMCA Rehire?  Yes  No

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

Driver License or ID #: \_\_\_\_\_ State Issued: \_\_\_\_\_ Expiration date: \_\_\_\_\_

**LIST ALL RESIDENCES IN LAST 7 YEARS:** Beginning with your current address, list **ALL** current and former residences for the last seven (7) years. Include all college dorms, apartments, etc. Do not list P.O. Boxes. **Write additional addresses on the back of this page, if necessary.**

**Current:** \_\_\_\_\_ yrs. \_\_\_\_\_ mos.

Street

City

State

Zip

**Former:** \_\_\_\_\_ yrs. \_\_\_\_\_ mos.

Street

City

State

Zip

**Former:** \_\_\_\_\_ yrs. \_\_\_\_\_ mos.

Street

City

State

Zip

### EDUCATION

High School: \_\_\_\_\_ City / State: \_\_\_\_\_

Last Year Attended: \_\_\_\_\_  Graduated  Did Not Graduate  GED

College: \_\_\_\_\_ City / State: \_\_\_\_\_

Last Year Attended: \_\_\_\_\_  Graduated  Did Not Graduate

### CRIMINAL HISTORY

**1) Have you ever been convicted of any criminal violation of law, pled guilty or no contest to any criminal offense, received deferred adjudication, adjudication of delinquent conduct, probation, or been convicted in a military court-martial\*?**

NO  YES If "YES," please explain the following for each offense:

Date(s)	Location(s)	Nature of offense	Current Status/Disposition
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_____	_____	_____	_____
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**2) Do you currently have any unresolved pending criminal legal matters?**  NO  YES

If YES, please explain in detail the date, nature, location, current status, and next court date for each offense:

\_\_\_\_\_

\_\_\_\_\_

For purposes of employment with this YMCA, "conviction" includes being sentenced to confinement, paid a fine, served time, were placed on probation (**including deferred adjudication**), and/or any court-ordered restitution.

**\*IMPORTANT:** A conviction record will not necessarily be a bar to employment. Factors such as age, date of offense, seriousness, nature of the violation(s), and rehabilitation will be taken into consideration.

I hereby certify that all information above is complete and accurate, and I hereby authorize the release of any information regarding my background (criminal history), employment history and education. I release the YMCA of Greater Williamson County and its agents from any and all liability arising as a result of any such verifications.

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