

Thank you for your interest in becoming a Wenatchee Valley YMCA Volunteer.

The Wenatchee Valley YMCA depends heavily on volunteer support. As a not-for-profit organization, the YMCA actively recruits volunteers in order to keep fees affordable and to insure that programs are accessible to a broad segment of the YMCA's service area. More than 400 volunteers share their time and talents to enhance the quality and strength for the YMCA programs. *Volunteering at the YMCA is a true volunteer experience, the only reward is the good feelings you receive.*

Please complete the attached paperwork and return it to the YMCA Membership Service Desk. We look forward to reviewing your application. Please review the attached Volunteer Handbook. If you have questions, please speak with the Director of Human Resources.

AREAS OF INTEREST:

CHILDREN'S PROGRAMS

Babysitting Attendant	(Must be at least 14 years old.)
Youth and Teen Center Attendant	(Must be at least 18 years old.)
After School Tutor	(Must be at least 14 years old.)

Time limit 2:15 pm - 4:30 pm unless early release.

AQUATICS

Y-Splash Summer Program Ambassador	(Must be at least 12 years old.)
Swim Lesson Assistant Instructor	(Must be at least 14 years old.)

FITNESS CENTER

Equipment Maintenance/Cleaning	(Must be at least 18 years old.)
Floor Coverage/Greeter	(Must be at least 18 years old.)
WHS Fitness Specialist Class	(Must be enrolled in class at WHS.)
Workshop Instructor	(Must be at least 18 years old.)

In your own words explain what you would like to teach here at the YMCA:

LAKE WENATCHEE SUMMER YMCA CAMP

Work Parties	(All ages welcome.)
Nurse, EMT or DR	(Must have a current certificate.)
Resident Camp Support, Program Support or Instruction	(Must be at least 18)
Counselor in Training Program	(Must be 16 or 17 years old.)

SPECIALTY PROGRAMS

Special Events: Healthy Kids Day, Kid's Day in the Park, Home and Garden Show
Other
In your own words explain what you would like to do here at the YMCA

Name: _____ Signature: _____

Thanks again for applying to Volunteer at the Wenatchee Valley YMCA.

*If you are inquiring about Court Order Service please call the Human Resources Director.

**WENATCHEE VALLEY YMCA
APPLICANT CRIMINAL AND ABUSE DISCLOSURE
(PURSUANT TO CHAPTER 486, WASHINGTON LAWS OF 1987)**

At engagement of any volunteer in any activity involving children under 16 years of age, and at employment of all employees, the Wenatchee Valley YMCA will make inquiry to the Washington State Patrol regarding any and all matters referred to in this disclosure form. Any employment or engagement will be on a conditional basis only, pending completion of the background investigation by the Applicant Criminal History Review Board, and on receipt of the official response thereto. Official records supplied in response to such inquiry will be used by the YMCA only for making the initial employment or engagement decision. There will be no further dissemination of such record. When such inquiry has been made and official response has been received by the YMCA, a copy of the response will be available to you within 10 days of such receipt.

1. Applicant's full name _____
Any other name(s) applicant has used _____
Applicant's phone number (_____) _____ - _____ Birthday ____ / ____ / ____
Applicant's address _____ City, State, Zip _____
Social Security Number _____

2. Have you ever been convicted of any of the following crimes? YES ____ NO ____

AGGRAVATED MURDER-1 st or 2 nd degree	ARSON- 1 st degree	BURGLARY
ASSAULT- 1 st , 2 nd or 3 rd degree	RAPE - 1 st , 2 nd or 3 rd degree	INCEST
STATUTORY RAPE - 1 st , 2 nd or 3 rd degree	ROBBERY - 1 st or 2 nd degree	SIMPLE ASSAULT
SEXUAL ASSAULT	EXTORTION - 1 st or 2 nd degree	VEHICULAR HOMICIDE
INDECENT LIBERTIES	PROMOTION PROSTITUTION- 1 st degree	
CRIMINAL MISTREATMENT	UNLAWFUL IMPRISONMENT	
SEXUAL EXPLOITATION OF MINOR- 1 st or 2 nd degree		
COMMUNICATION WITH MINOR (for immoral purposes)		

IF YES GIVE NAME OF EACH SUCH CRIMES AND PLACE AND YEAR OF CONVICTION

3. Have you ever been found by a court in a civil action (including domestic relations and child dependency) to have physically or sexually abused or exploited any minor? YES ____ NO ____

IF YES GIVE PLACE, YEAR AND COURT IN WHICH SUCH ADJUDICATION WAS MADE, AND NAME OF MINOR

4. Have you ever been found by a disciplinary board to have physically or sexually abused or exploited a minor? YES ____ NO ____

IF YES, GIVE PLACE AND YEAR OF SUCH FINDINGS, NAME OF BOARD AND NAME OF MINOR

UNDER PENALTY OF PERJURY, I SWEAR OR AFFIRM THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE INFORMATION SUPPLIED BY ME IN THIS DISCLOSURE IS TRUE, ACCURATE AND COMPLETE.

APPLICANT'S SIGNATURE _____ DATE _____

WITNESS' SIGNATURE _____ DATE _____

WITNESS' PRINTED NAME _____ DATE _____

WENATCHEE VALLEY YMCA

217 Orondo Ave
Wenatchee, WA 98801
(509) 662-2109

The mission of the Wenatchee Valley YMCA is to strengthen youth, families, and communities by promoting Christian principles and putting them into practice through leadership and programs that build healthy spirit, mind and body for all.

VOLUNTEER APPLICATION

PLEASE TYPE or PRINT: To help us learn about your abilities, experiences, and interests, please complete this Application as thoroughly as possible.

Last Name	First Name	Middle Name	Today's Date
Current Address	City	State Zip	Telephone/Message Phone
How long (Mo/Yr to Mo/Yr)? From ___/___ to ___/___			
Previous Address	City	State Zip	Cell Phone (Optional)
How long (Mo/Yr to Mo/Yr)? From ___/___ to ___/___			
Email Address (Optional)	Social Security Number (Last four digits) XXX-XX- ____		
What type of volunteer experience are you seeking?	Date available to begin:	Are you age 18 or older? <input type="radio"/> No <input type="radio"/> Yes	
How were you referred to the YMCA? <input type="checkbox"/> Advertisement <input type="checkbox"/> Employee Referral <input type="checkbox"/> Walk-In <input type="checkbox"/> Court Ordered <input type="checkbox"/> Other (Who?) (please specify below)			
Why are you interested in volunteering at the Wenatchee Valley YMCA?			
Have you previously volunteered here? <input type="radio"/> No <input type="radio"/> Yes – if yes When: _____ Under what name _____			
Do you have relatives working here? <input type="radio"/> No <input type="radio"/> Yes	Are you presently employed? <input type="radio"/> No <input type="radio"/> Yes		
Name _____ Relationship _____	May we inquire of your employer? <input type="radio"/> No <input type="radio"/> Yes		
GENERAL INFORMATION			
What do you expect to be doing in five years?	Based on today's prices and wages, what monthly income do you expect to be earning in five years?		
What has been your most interesting work?	What made it interesting?		
What work experience did you dislike most?	Why did you dislike it?		
Are you awaiting trial on a felony charge? <input type="radio"/> No <input type="radio"/> Yes Please Explain (<i>will not necessarily disqualify volunteer service</i>): _____			
Have you been convicted of a felony (excluding any record or conviction that has been judicially sealed, expunged, eradicated, or dismissed)? - <input type="radio"/> No <input type="radio"/> Yes Please Explain (<i>conviction will not necessarily disqualify volunteer service</i>): _____			
Have you ever been convicted of child abuse or a sex-related crime? <input type="radio"/> No <input type="radio"/> Yes			

I certify that all of the information submitted on this page to this application form is true and complete and that I have not withheld, nor will I withhold, any information that would affect my application for employment. Initial

Check the boxes that indicate all levels of completed education:

High school graduate or GED School _____

Some college School _____

College Graduate: School _____ Degree _____ Major: _____

Trade or Business School School: _____ Field of Study _____

Highest Degree Earned (circle one) 1. High School 2. Associate 3. Bachelor 4. Master 5. Doctorate

Professional memberships, certificates or licenses held. (Exclude those indicating race, color, religion, sex, sexual orientation, national origin, age, physical or mental disability or labor organization affiliations.)

Additional Education, Vocational and/or Professional Information such as special areas of research or study, seminars, etc.

List equipment you operate that may help qualify you for employment: (please include computer skills and applications used)

EMPLOYMENT HISTORY and/or VOLUNTEER WORK: List ALL periods of employment, self-employment, U.S. military service, volunteer work, and/or non-employment starting with the MOST RECENT FIRST.

From (mo/yr)	Employer	Position/ Description of Duties	
To (mo/yr)	Street Address	Supervisor's Name / Title	Supervisor Contact Information
Telephone Number	City, State, Zip Code	Starting Pay Last Pay	Reason for Leaving
From (mo/yr)	Employer	Position/ Description of Duties	
To (mo/yr)	Street Address	Supervisor's Name / Title	Supervisor Contact Information
Telephone Number	City, State, Zip Code	Starting Pay Last Pay	Reason for Leaving

PERSONAL AND PROFESSIONAL REFERENCES: Please include one close relative in this group. Must provide at least 3 contacts.

Relationship	First and Last Name	Address	Telephone Number

I certify that all of the information submitted on this page to this application form is true and complete and that I have not withheld, nor will I withhold, any information that would affect my application for employment. Initial

WENATCHEE VALLEY YMCA CERTIFICATION AND ACKNOWLEDGMENT

I certify that all information submitted in this application form, or in any resume, interview, or other information provided, is true and complete and that I have not knowingly withheld, nor will I withhold, any information that would affect my application for volunteer service with the Wenatchee Valley YMCA (hence referred to as "the Y"). I also understand and agree that:

I understand that this application is only valid for the position applied for at present and that the Y is not obligated to retain or consider this application for future openings.

_____ **Initial**

I authorize investigation of all facts and statements contained in this application. I understand that falsification, misrepresentation or omission of facts called for may result in immediate termination from service or removal of my application from consideration. I authorize the Y to secure information about my experience with former employers, education institutions and agencies, and for those parties to provide information concerning my experience releasing all parties from any liability arising therefore.

_____ **Initial**

If I volunteer for the Y I understand my service can be terminated, with or without cause and with or without notice, at any time at the option of the Y or myself. I understand that, other than the CEO of the Y, no manager, supervisor or representative of the Y has authority to enter into any agreement for service for any specific period of time, or to make any agreement contrary to the foregoing. Only the CEO of the Y has the authority to make any agreement contrary to the foregoing and then only in writing. I further expressly agree that, with respect to the at-will employment/volunteer relationship, this constitutes the full, complete and final expression of the parties' intent concerning the nature of any volunteer relationship between myself and the Y.

_____ **Initial**

Prior to my beginning of volunteer service, the Y reserves the right to require any lawful form of medical, drug, alcohol, psychological, character, integrity, aptitude, skill, or other test or examination.

_____ **Initial**

The Y will conduct a criminal records check on all prospective employees and volunteers. Volunteer service will be discontinued immediately if the individual's criminal record does not meet the following standards:

- a) Volunteers must have no Class A felony convictions, no Class B felonies within the last ten years, and no Class C felonies within the past five years. If disclosed in advance, this standard may be waived by the Y Committee under special circumstances.
- b) Volunteers must have no convictions for crimes of a sexual nature, for crimes against a child or for crimes of violence. If disclosed in advance, this standard may be waived by the Y Committee for misdemeanor charges under special circumstances.

_____ **Initial**

My signature below certifies that I have read and understand the foregoing and to the best of my knowledge and belief, the information on this form is true and correct. My signature below also certifies that I agree to be bound by the terms and conditions stated in this application. This application contains all the understandings and agreements between me and the Y concerning the nature of my service, if any, by the Y and supersedes all prior and/or contemporaneous practices, oral or written agreements, understandings, statements, representations and promises, express or implied, between me and the Y. I understand and agree that, except as noted above, no person who is either an agent or employee of the Y may modify, delete, vary or contradict, whether orally or in writing, the terms and conditions set forth herein.

Applicant's Signature

Applicant's Printed Name

Date of Application

Wenatchee Valley YMCA
Code of Conduct -Child Abuse Prevention
Revised 12/2015

The Y is committed to creating an environment for youth that is safe, nurturing, empowering, and that promotes growth and success. The following policies are intended to assist employees and volunteers in making decisions about interactions with youth. No form of abuse will be tolerated, and confirmed abuse will result in immediate dismissal from our organization. All reports of suspicious or inappropriate behaviors with youth or allegations of abuse will be taken seriously. Our organization will fully cooperate with authorities if allegations of abuse are made that require investigation.

1. In order to protect Y employees, volunteers and program participants, one employee or volunteer will never be alone with a single child unobserved by another adult.
 - Employees and volunteers may not be alone with children they meet in the Y's programs outside of their official YMCA interaction, which includes social media and other forms of electronic communication. (The exception to the above rule, an employee or volunteer may complete a Babysitting Waiver which is signed by the parent and the Executive Director...)
 - Employees and volunteers may not transport children in programs in their personal vehicles. Any exceptions require a written explanation in advance and require administrative approval.
2. Employees and volunteers providing direct care for children will be identified by photo identification, on duty photo, or uniform that is familiar to the children with whom they work.
3. Employees and volunteers will portray a positive role model for children by consistently demonstrating an attitude of respect, courtesy, tact, and maturity.

Employees and volunteers will:

 - Appear neat, clean and be appropriately attired.
 - Use appropriate verbal interactions that are age appropriate for the youngest child in the group.
 - Respond to all children with respect and consideration.
 - Have prior permission when giving a specific child a gift.

Employees and volunteers will not:

 - Use or be under the influence of tobacco, alcohol, marijuana, or illegal drugs in the presence of children.
 - Become romantically involved with program participants under the age of 18 years age.
 - Make personal displays affection toward other adults.
 - Keep secrets with a child.
 - Show favoritism.
 - Accept any cash gifts- please see handbook for specifics on business gifts or gratuities.
 - Use profanity, share inappropriate jokes, share the intimate details of one's life.
 - Participate in any kind of harassment during working hours.
 - Report for work with any physical or psychological condition that might adversely affect children's physical or mental health.
4. Employees and volunteers will treat children equally regardless of gender, race, religion, culture, sexual orientation, or disability; respect children's rights to not be stared at, not comment about or touch children in ways that make them feel uncomfortable.
5. Employees and volunteers must disclose convictions for any felonies, crimes of a sexual nature, crimes against a child, or crimes of violence to the Human Resources Director or the Executive Director.
6. Employees and volunteers will be alert to the physical and emotional state of all children in Y programs. Understand the legal and ethical obligation to recognize and report signs of injury or suspected child abuse or neglect to the appropriate authorities.
7. Employees and volunteers will not abuse children or allow children to be abused in anyway including but not limited to the following:

- Physical abuse: hitting, spanking, shaking, slapping, unnecessary restraints
- Verbal abuse: degrading, threatening, cursing, inappropriate jokes
- Sexual abuse: inappropriate touching, exposing oneself, sexually orientated conversations, sexually orientated materials
- Mental abuse: shaming, humiliation, cruelty
- Neglect: withholding food, water, shelter, attention
- Bullying:
 - Physical bullying: physical force against another child
 - Verbal bullying: use of words to hurt another such as belittling or name calling
 - Nonverbal or relational bullying: manipulation of relationship or desired relationship to harm another person. Includes gossip and gestures
 - Cyberbullying: intentional and overt act of aggression toward another using technology as a tool.

11. Employees and volunteers are required to immediately report any potential violation of this Code of Conduct or any other activity that may have the potential to cause harm to a child to the Executive Director or the Human Resources Director.

I understand that any violation of this Code of Conduct may result in termination and that signing this Code of Conduct does not affect my status as an “at will” employee or volunteer.

Volunteer Signature

Date

Please Print Last Name

First Name

Statement of Abuse Prevention

The Wenatchee Valley YMCA has a policy that we explain to each of our candidates and employees. The YMCA is aware that there may be people who want to work or volunteer here for the wrong reasons. To prevent access to the children we serve by those individuals, we check every applicant’s criminal history and speak with individuals about their character as well as the job skills. We structure our programs so that no staff member is alone with a child or other vulnerable individual. We try to prevent any opportunity for abuse and we periodically interview children and others about their experiences in the program. We take all allegations, including those from children, very seriously. We refer all allegations to the authorities for investigation, and we cooperate fully with any investigation. Wrongdoers need to know that this is a very risky place to attempt to abuse children or the vulnerable. This thorough process not only protects the people in our care, but it also minimizes the potential for false abuse allegations against innocent staff members and volunteers. Do you have any questions about our policy?

Signature of Applicant

Printed Name

Date

Criminal History Information Request

Child/Adult Abuse Information Act – RCW 43.43.830

A Requesting Agency / Address

Wenatchee Valley YMCA, 217 Orondo Ave, Wenatchee, WA 98801

I certify this request is made pursuant to and for the purpose indicated.

YMCA Authorized Signature

Director of HR

Date

B Purpose

Non-Profit Organization

C Applicant of Inquiry

Applicant's Name: _____

First

Middle

Last

Alias / Maiden Name: _____

Date of Birth: ____ / ____ / ____ Sex: _____ Race: _____

Social Security Number: ____ - ____ - ____ Driver's License # / State: _____

Applicant's Address: _____

City / State / Zip Code: _____ Phone #: (____) ____ - ____

I certify that all information submitted about myself on this form is true and complete. I also understand that the Wenatchee Valley YMCA will conduct at least but not limited to a criminal background check with the Washington State Patrol via the internet.

Applicant's Signature: _____ Date: _____

D Identification and Criminal History

As of this date, the applicant named above shows no evidence pursuant to RCW 43.43.830 through 43.43.845.

Signature of person completing form: _____

Notes of Inquiry: _____