



## **Champaign Family YMCA Volunteer Application**

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 Champaign County. You will find questions on this form about your background, places of employment, and so on. In addition, we reserve the right to conduct background and reference checks on all volunteers.

Thanks for your cooperation in this effort and your interest in the YMCA. If you have any questions about this or any part of our application process, please contact Karen Keller, Administrative Director, at (937)484-3556.

Today's Date	(Month/Day/Year)							
Name(Last)	(First)		(Middle)					
(Last)	(FIISt)		(iviidale)					
Address								
City	State	Zip						
Phone: Day	Evening							
How long have you been at this address?								
Email								
Are you 18 years of age or over?  □ Yes □ No (If no, please have your parent or guardian sign the application, too.)								
<b>Emergency Contact</b>								
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 volunte	er opportunities that in	terest you?
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Are there any particular skills, talents, or inte	erests you'd like to shar	re?
are there any particular entirely talente, or mit		
What other organizations have you volunteer	rod for if any?	
What other organizations have you volunteer	ed for, it arry?	
Are you a member of the YMCA? (Membershi	p is not required)	
Employment Information		
Name of employer		
Employed from when to when?		(include month and year)
Address		
City	State	Zip
Phone		

**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		otaay	2114 24193	or addades.	2.prema			
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:								
Have you ever been convicted of a criminal offense? ☐ Yes ☐ No If so, what was it?								
References Please list three people besides relatives and employers.  1. Name								
	Relationship to you							
2. Name								
Address								
Telephone	Relationship to you							
3. Name								
Address								
Telephone	ephone Relationship to you							
By signing this application, I acknowledge that I am offering my time freely, and that no promise of compensation has been expressed or implied.								
Your signature _	Date							
Parent's or guardian's signatureDate								

(if you're under 18)