MANKATO FAMILY YMCA VOLUNTEER APPLICATION

Thank you for choosing the **Mankato Family YMCA** to share your time and talent. Volunteers are the backbone of our mission; quite simply, we could not serve our community's families and youth without volunteers like you.

To ensure your volunteer experience is as impactful for you as it is for our members, we use this application to match your unique skills with the right opportunities. Please note:

- **Meaningful Placement:** We aim to respect your time by finding a role that fits your interests.
- **Safety First:** To protect the children and vulnerable adults in our care, we conduct thorough background and reference checks on all applicants, regardless of prior relationship with the Y.
- **Policy Note:** We do not offer or accept court-ordered community service.

Not every applicant is a fit for our specific programs, but we appreciate your transparency and commitment to keeping our community safe. We look forward to exploring how we can grow together.

PERSONAL INFORMATION

Today's Date: _____

First & Last Name: _____ DOB: _____

Address: _____ City: _____ State: _____ Zip: _____

Gender: _____ Phone: _____ Email: _____

Are you currently a YMCA Member? ☐ YES ☐ NO *(Membership is not required to volunteer)*

Are you 18 years of age or older? ☐ YES ☐ NO

EMERGENCY CONTACT INFORMATION

First & Last Name: _____Phone: _____

CRIME CONVICTIONS

Have you been convicted of any crimes (in Minnesota or elsewhere)? ☐YES ☐NO

Have you ever been found liable for civil damages or penalties involving sexual or physical abuse? ☐YES ☐NO

Have you had parental rights terminated for sexual or physical abuse of children? ☐YES ☐NO

EDUCATION & WORK EXPERIENCE

Current/most recent high school/college attended and current grade level: _____

Highest level of education:

☐High School Graduate/GED ☐Technical ☐Associates ☐Bachelors ☐Masters ☐Doctorate

Current Occupation: _____ Employer: _____

Job Title: _____ Description of work: _____

_____

REFERENCES
Please list name, phone number, address & email address for three (3) references.

1. _____

2. _____

3. _____

I authorize the Mankato Family YMCA to make verification contacts of my current/recent employer and listed references. ☐YES ☐NO

What type of volunteer opportunity are you looking for?

- ☐ One-time opportunity
- ☐ On-going occasional or frequent opportunity (weekly, monthly, seasonal)
- ☐ Internship

Do you seek volunteer opportunity in part to fulfill a requirement? If so, what type?

- ☐ No, not required
- ☐ Yes, a school class or club/organization/activity requiring a project with a specific purpose and/or including specific volunteer hours (i.e. teacher education prep, non-profit management, recreational therapy, etc.)
- ☐ Yes, required hours (i.e. satisfy school/college application or scholarship, Fraternity/Sorority volunteer, educational program internship, etc.)
- ☐ Yes, other. Please specify: _____

*Note: We cannot accept and do not offer court ordered required volunteerism.

If there are requirements for you to receive credit for volunteering, please share them here:
(example: Teacher education program must observe and work with school-aged children for at least 4 weeks for a total of 20 hours)

_____

_____

VOLUNTEER EXPERIENCE

If you are applying for a posted volunteer position, please list: _____

*(If you are not applying for a posted position, please complete the **Volunteer Opportunity Interest** section below.)*

How did you learn about this volunteer opportunity? _____

List your related skills, talents, or experience for the position you are applying: _____

_____

When are you able to start volunteering? (Please list date) _____

DISCLOSURE AND AUTHORIZATION FORM TO OBTAIN BACKGROUND CHECKS AND CONSUMER REPORTS FOR VOLUNTEER PURPOSES.

Date of birth: _____ Driver's License Number & State: _____

If you are selected to move forward in the screening process, you will be sent a link to complete the information for your background check by our background-screening provider, Praesidium. When completing your online background pre-screening information, you will be required to provide your Driver's License number and/or Social Security number through their secured website.

PARENT/LEGAL GUARDIAN INFORMATION
If you are under 18, please provide the following information.

Parent/Legal Guardian First and Last Name: _____

Parent/Legal Guardian Address: _____

Parent/Legal Guardian Email Address: _____

Parent/Legal Guardian Phone Number: _____

Parent/Legal Guardian Authorization:
Parent/Legal Guardian gives authorization for the minor's applicants to obtain background check and consumer report. ☐ **YES** ☐ **NO**

VOLUNTEER OPPORTUNITY INTERESTS

Please list your top five areas of volunteer interest. We may contact you if/when opportunities in the areas you've listed become available.

1. _____
2. _____
3. _____
4. _____
5. _____

Areas of Interest:

- Youth Sports Coach
- STRIDE for ALL Coach
- Chesley Skate Park
- Youth Swim Lessons Aid
- Marlins Swim Team
  -Practice Assistant Coach
  -Home Meet Assistance
- After School Adventures
  -Assistant Teacher
- Preschool Teacher Assistant
- Preschool Reader
- Child Watch Assistant
- Birthday Party Assistant
- Rec Room Assistant
- Youth & Teens
- Youth Socials
- ForeverWell (Active Older Adults)
- Member Services
- Clerical Assistant
- Housekeeping
- Building & Grounds
- Special Events
  -Corn Roast
  -Golf Tournament
  -Fun Run
  -Fundraising
- Internship Volunteer
- Other (please specify)

If you have any questions about the position for which you are applying, please call or email the Mankato Family YMCA.

Volunteer Applicant's Signature: _____ Date: _____