-Thank you for considering the **Smithfield YMCA** as a place to donate your time and talents to strengthen community. Volunteers are vital to the Y. Without them, we wouldn’t be able to meet the needs of the kids, families, and adults who live in Smithfield, Foster, Glocester and Scituate.

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, and places of employment. We hope you’ll understand that, unfortunately, not everyone will be appropriate to volunteer at the Y. We make 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 **Smithfield YMCA.**

Thanks for your cooperation in this effort and your interest in the Y. If you have any questions about this or any part of our application process, please contact **Torie Follett, Program Director, 401-949-2480 ext105.**

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?

Social Security Number – –

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?

Are there any particular skills, talents, or interests you’d like to share?

What other organizations have you volunteered for, if any?

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

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

Have you ever been convicted of a criminal offense? Yes No If so, what was it?

The **Smithfield YMCA** conducts background checks on volunteers.

### 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.

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

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.

Your signature

Date

Parent’s or guardian’s signature
(*if you’re under 18*)

Date