



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YMCA OF GREATER SYRACUSE

Volunteer Application

Welcome to the YMCA of Greater Syracuse. We're grateful for your interest in the Y and rely on the expertise and passion of volunteers like you to help us deliver on our mission, which is to strengthen our community through programs that build healthy spirit, mind and body for all.

Requirements to be a Volunteer

- Minimum age of 14 (with proof of valid working papers).
- Complete the Volunteer Application and supply three references.
- Successfully clear the Ys mandatory background check and reference screening process.
- Review and sign off on the Volunteer Handbook and all associated volunteer paperwork.
- Be willing to submit to a criminal background check if over 18 years of age.

If you have any questions about the Ys volunteer application process, please contact Paulette Rust, Director of Human Resources at 315.474.6851.

Please return your Application to the Member Service Desk or mail it to the branch location where you would like to begin volunteering.

Downtown Syracuse YMCA

Cheryl Pusztai, Executive Director, 340 Montgomery St., Syracuse, NY 13202 – 315.474.6851

Arts Branch, Downtown Syracuse YMCA

Phil Memmer, Executive Director, 340 Montgomery St., Syracuse, NY 13202 – 315.474.6851

North Area Family YMCA

Cheryl Walker, Operations Director, 4775 Wetzell Road, Liverpool, NY 13090 – 315.451.2562

Northwest Family YMCA

Lisa Pachmayer, Executive Director, 8040 River Road, Baldwinsville, NY 13027 – 315.303.5966

East Area Family YMCA

Kelly Carinci, Associate Executive Director, 200 Towne Dr., Fayetteville, NY 13066 – 315.637.2025

Southwest YMCA

4585 West Seneca Turnpike, Syracuse, NY 13215 – 315.498-2699

Manlius YMCA

Lesley Wilcox, Assoc. Exec. Dir., 140 West Seneca Turnpike, Syracuse, NY 13104 – 315.692.4777

As an Equal Opportunity Employer, the YMCA of Greater Syracuse selects volunteers without regard to an applicant's race, creed, color, religion, national origin, sexual orientation, ancestry, gender, marital status, disability, age, or veteran status.

YMCA OF GREATER SYRACUSE

Volunteer Application

(Please Print)

Date of Application: _____

Are you a Member of the YMCA? (Membership is not required) ____ Yes ____ No

Last Name:	First Name:	Middle Name:	
Address (Number & Street):		City:	State: Zip Code:
Cell Phone:	Home Phone:	E-Mail Address:	

Are you 14 years of age or over? ____ Yes ____ No
 If you are not at least 18 years of age your parent or legal guardian will be required to sign this application.

Please share with us why you wish to volunteer for the YMCA of Greater Syracuse.

In which of the following areas would you like to volunteer?
 ____ Working with Children ____ Child Care ____ Youth Sports Coach ____ Teen Activities ____ Office or Clerical
 ____ Other (Please Specify) _____

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

Check which day(s) you would be available to volunteer and write in what time(s):

- | | |
|--|---|
| <input type="checkbox"/> Sunday _____ | <input type="checkbox"/> Thursday _____ |
| <input type="checkbox"/> Monday _____ | <input type="checkbox"/> Friday _____ |
| <input type="checkbox"/> Tuesday _____ | <input type="checkbox"/> Saturday _____ |
| <input type="checkbox"/> Wednesday _____ | |

How Often: _____

EDUCATION

Education Note: Formal education is not required to be a volunteer.

We welcome experience of all kinds!

School	Name/ Address of School	Course of Study	Last Grade Completed	Diploma or Degree
High School				
College				
Other				

REFERENCES

Please list three references, two should be people other than relatives, one should be a relative.

Name	Phone Number	Address	Relationship To You	Years Known

EMPLOYMENT/VOLUNTEER HISTORY

Start with the most recent job or volunteer experience and list others in sequence.

Employer:		Address:	
Supervisor:	Phone Number:		Position(s) Held:
Dates of Employment: From: ____/____/____ To: ____/____/____		Reason for Leaving:	

Employer:		Address:	
Supervisor:	Phone Number:		Position(s) Held:
Dates of Employment: From: ____/____/____ To: ____/____/____		Reason for Leaving:	

Employer:		Address:	
Supervisor:	Phone Number:		Position(s) Held:
Dates of Employment: From: ____/____/____ To: ____/____/____		Reason for Leaving:	

LIST ADDITIONAL EDUCATION, BUSINESS OR CIVIC ACTIVITIES OR SPECIAL SKILLS- (CARING FOR CHILDREN, LANGUAGES, ETC.)

<p>DECLARATION</p> <p>A conviction or record does not automatically disqualify you from volunteer consideration. The nature of the offense, date of conviction, work history and other job-related qualifications will be considered in making our decision. Please give all the facts, so that a fair decision can be made. However failure to provide complete and accurate information relating to criminal convictions will result in immediate discharge.</p> <p>Have you ever been convicted of a crime (felony or misdemeanor?) ____Yes ____No</p> <p>If yes, please explain the nature of the crime, date of conviction and city/state where conviction occurred: _____</p> <p>_____</p> <p>_____</p> <p>_____</p>

The YMCA of Greater Syracuse is committed to provide an environment dedicated to our mission.

Your association the Y as a volunteer is contingent on the results of a background check, including a criminal background history records check and reference screening process. Failure to provide complete and accurate information relating to criminal convictions will result in termination of the volunteer relationship with the Y.

In accepting a volunteer position, I agree to serve the YMCA of Greater Syracuse to the best of my ability, and will conduct myself in accordance with the Y's core values of caring, honesty, respect and responsibility at all times. I have completed this application truthfully and sincerely. Additionally, I hereby authorize and request any and all of my employers and any other firm or corporation to furnish any and all information concerning my personal background and hereby release each such employer or person from any and all liability by reason of furnishing the requested information. I further agree to adhere to the rules and regulations of the YMCA and verify that all of the above information is true to the best of my knowledge.

Thank you for completing this Application. We appreciate your interest in contributing your time and skills to the YMCA of Greater Syracuse.

Volunteer Signature

Date

Parent or Guardian's Signature (Required if under 18)

Date