

VOLUNTEER APPLICATION



**MCPHERSON
FAMILY
YMCA**

Prospective volunteers will receive consideration without discrimination because of race, creed, color, sex, age, national origin, disability or veteran status.



**MCPHERSON
RECREATION
COMMISSION**



Volunteers of this organization are selected in order to accomplish the legal and operational duties established by statute and by the policy choices of the organization's Commissioners/Board Members. Each employee is expected to conduct him / herself in a manner which reflects favorably upon the organization and to recognize that our employees are subject to additional public scrutiny in their public and personal lives.

Last Name	First	Middle	Date
Street Address			Home Telephone ()
City/State/Zip			Cell Telephone Texting () Y N
Have you ever applied to volunteer with us? Yes No If yes: Month and Year _____ Location _____			Email Address
Position Desired			Are you at least 18 years of age? Yes No If no, provide birth date _____
			When will you be available to begin ? _____

Other special training or skills (languages, Machine operation, Etc..)

**Membership in Professional or Civic Organizations
(Exclude those which may disclose your race, color, Religion or national origin)**

VOLUNTEER/EMPLOYMENT HISTORY

Please give accurate, complete full-time and part-time employment record.
Start with your present or most recent employer or volunteer work

Company Name	Telephone ()
Address	Employed - (State month and Year) From To
Name of Supervisor	Weekly pay Start Last
State Job Title and Describe your work:	Reason for Leaving:

Company Name	Telephone ()
Address	Employed - (State month and Year) From To
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Company Name	Telephone ()
Address	Employed - (State month and Year) From To
Name of Supervisor	Weekly pay Start Last
State Job Title and Describe your work:	Reason for Leaving:

WE MAY CONTACT THE EMPLOYERS LISTED UNLESS YOU INDICATE THOSE YOU DO NOT	<p style="text-align: center;">DO NOT CONTACT</p> Employer Number(s) _____ Reason _____ _____
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EDUCATION

School	Name and Location of	Course of Study	No. of Years	Did you Graduate
Graduate				
College				
Business / Trade				
High School				
Elementary				

REFERENCES

(Please list at least one family member as a reference.)

NAME:	ADDRESS:	PHONE #:	YEARS KNOWN:	RELATIONSHIP:
NAME:	ADDRESS:	PHONE #:	YEARS KNOWN:	RELATIONSHIP:
NAME:	ADDRESS:	PHONE #:	YEARS KNOWN:	RELATIONSHIP:
NAME:	ADDRESS:	PHONE #:	YEARS KNOWN:	RELATIONSHIP:

Are you, or have you ever been employed or volunteered by any YMCA/ or Recreation Commission?

Yes / No If yes, when _____

What Location: _____

Were you referred to the YMCA/MRC by: Own Accord _____

YMCA Employee _____ MRC Employee _____ Other _____

Have you ever been bonded? Yes / No

If yes, with what employers? _____

How long at present address? _____years	Previous Address: _____
How long at previous address? _____years	

State names of relatives and friends working for YMCA or MRC.

Have you ever been convicted of a crime, on diversion for a crime or are you now charged with any offense against the law? NO YES If your answer is "Yes" give details below. Show for each offense: (1) date, (2) charge, (3) place, and (4) disposition. NOTE: A conviction does not automatically mean you cannot be considered. What you were convicted of and how long ago, are important. Give all of the facts so that a decision can be made.

DATE	CHARGE	LOCATION	DISPOSITION

I certify the facts set forth in this application for volunteer are true and complete to the best of my knowledge. I understand if employed, false statements in this application shall be considered sufficient cause for dismissal. It is understood volunteering with the McPherson Family YMCA and or McPherson Recreation Commission is subject to passing a criminal records check and a child abuse screening: therefore, I authorize the YMCA/MRC to conduct a background check, child abuse screening and make investigation of my prior educational, volunteer and work history.

I understand if I am assigned, the length of my volunteering is not guaranteed. Recognizing I will be free to voluntarily terminate my assignment at any time with or without cause, I acknowledge the YMCA/MRC is an at-will agency and will be free to terminate my assignment at any time, with or without cause.

_____ Date _____ Signature

MCPHERSON FAMILY YMCA **YMCA Mission: To put Christian principles into practice through programs that build healthy spirit, mind and body for all.** **MCPHERSON RECREATION COMMISSION** **The Benefits are Endless!**

220 N WALNUT, MCHPERSON, KS 67460 - 620/241-0363
www.mcphersonfamilyymca.org
www.mcphersonrecreation.org
www.mcphersonwaterpark.org