



Southeast Ventura County YMCA
 Association Office
 31105 E. Thousand Oaks Boulevard
 Westlake Village, CA 91362
 Phone: 805-497-3081 Fax: 805-496-4860
 www.sevymca.org

Branch: Conejo Valley
 Simi Valley
 Yarrow Family
 Association Office

VOLUNTEER APPLICATION

To the applicant: We appreciate your interest in our organization and are sincerely interested in your qualifications. A clear understanding of your background and volunteer history will aid us in placing you in the position that best meets your qualifications.

PLEASE PRINT PLAINLY

Date: _____

Last Name: _____ First Name: _____ MI: _____

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

Phone Number: _____ E-Mail: _____

Do you have any friends or relatives working / volunteering for the Southeast Ventura County YMCA? Yes No
 If yes, state name(s) and relationships:

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Are you 18 years of age or older? Yes No

What type of volunteer service are you looking for? _____

During what period of time will you be available?

From: _____ To: _____

What date can you start volunteer work? _____

If you have volunteered or worked at a YMCA in the past, please tell us where and when.

Where: _____ When: _____

Are there any experiences, training, skills or qualifications which you feel would especially fit you for service in the YMCA?

Have you been convicted of a criminal offense (felony or serious misdemeanor)? Yes No
 (Misdemeanor convictions for marijuana-related offenses that are more than two years old need not be listed).

If yes, state nature of the crime(s), when and where convicted, and disposition of the case. (Attach Additional Sheet as Necessary)

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

Other branches you are interested in? Conejo Valley Simi Valley Yarrow Family Association Office

Conejo Valley YMCA	Simi Valley Family YMCA	Yarrow Family YMCA
<i>Serving Thousand Oaks, Moorpark & Santa Rosa Valley</i>	<i>Serving Simi Valley</i>	<i>Serving Agoura Hills, Westlake Village, and Oak Park</i>
4031 N. Moorpark Road Thousand Oaks, CA 91360	3200 Cochran Street Simi Valley, CA 93063	31105 Thousand Oaks Blvd. Westlake Village, CA 91362
Phone: (805) 523-7613	Phone: (805) 583-5338	Phone: (818) 707-9622
Fax: (805) 523-8831	Fax: (805) 583-5476	Fax: (818) 706-0282



VOLUNTEER EXPERIENCE

List below all present and past employment, beginning with your most recent, including any periods of unemployment, if applicable. Use an additional sheet of paper, if necessary, to complete all work history.

Organization: _____ Dates of Service: _____ to _____
(MM/YYYY) (MM/YYYY)
 Address: _____ City: _____ State: _____
 Telephone: _____ Type of Business: _____ Supervisor: _____
 Your Position and Duties: _____

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 Address: _____ City: _____ State: _____
 Telephone: _____ Type of Business: _____ Supervisor: _____
 Your Position and Duties: _____

REFERENCES

Three (3) References at minimum must be listed, preferably previous employers or volunteer supervisors.

Reference's Name: _____ Occupation: _____

Phone Number: _____ Company: _____

Reference's Name: _____ Occupation: _____

Phone Number: _____ Company: _____

Reference's Name: _____ Occupation: _____

Phone Number: _____ Company: _____

Please Read Carefully, Initial Each Paragraph and Sign Below:

Initials I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for volunteering and that the answers given by me are true and correct to the best of my knowledge. I certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am engaged as a volunteer, regardless of the time elapsed before discovery.

Initials I hereby authorize the Southeast Ventura County YMCA to thoroughly investigate my references without giving me prior notice of such disclosure, in addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

Initials I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my time of volunteering, if selected, is intended to create a contract between me and the Company. In addition, I understand and agree that if I am engaged as a volunteer it is not for a definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.

Initials I understand that Southeast Ventura County does not carry or maintain health, disability or Workers Compensation insurance coverage for any volunteer. Each volunteer is encouraged to arrive with health insurance coverage in effect.

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS AND THAT I VOLUNTARILY SIGN THIS APPLICATION.

Signature of Volunteer: _____ Date: _____

Southeast Ventura County YMCA Volunteer Availability Schedule
Please Return with Completed Volunteer Application

First & Last Name: _____ Date: _____

Please Place an X next to every time and day that you **ARE** available

Time/Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
5:00 AM							
5:30 AM							
6:00 AM							
6:30 AM							
7:00 AM							
7:30 AM							
8:00 AM							
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