



# **ENGAGE, CONNECT, ADVOCATE VOLUNTEER AT THE Y**

YMCA of Columbia-Willamette  
Youth Sports Volunteer Packet

Revision: September 2016

**VOLUNTEER CHECKLIST**

Volunteer's Name: \_\_\_\_\_

Location: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

Start Date: \_\_\_\_\_

End Date: \_\_\_\_\_

**REQUIREMENTS**

**Received Date**

Volunteer's Description \_\_\_\_\_

YMCA Volunteer Application \_\_\_\_\_

Fair Credit Reporting Act Disclosure Notice \_\_\_\_\_

Photocopy of Identification \_\_\_\_\_

Code of Conduct \_\_\_\_\_

Reference Check Form \_\_\_\_\_

Volunteer Acknowledgement \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Volunteer Orientation \_\_\_\_\_

Submit all information to Human Resources/Payroll in Association Service  
**IMMEDIATELY** following the volunteer's start date.



**YMCA OF COLUMBIA-WILLAMETTE**  
**Position Title: Volunteer Coach**

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Location/Branch: Beaverton Hoop YMCA /Westside	Full Time/Part Time: Part-time
Department: Youth Sports	Pay Grade:
Supervisor: Sr. Program Director	Salary Range: Unpaid/Volunteer
Scheduled Hours: Varies	Closing Date:

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The YMCA of Columbia-Willamette is a mission driven organization, which seeks individuals who are enthusiastic and passionate about our mission and vision. We do this by putting the Christian principles of love, respect, honesty, responsibility and service into practice.

**Objective:** Under the direction of the Sr. Program Director, Volunteer Coaches are responsible for all aspects of coaching their assigned team throughout the sports season.

**Job Specifics:**

- Facilitate communicate with players parents, including practice and game times, snack schedule and special events.
- Teach and model sportsmanship, good conduct and respect.
- Plan and execute sport-specific practices.
- Introduce and build sport-specific skills.
- Attend all practices or games.
- Report all incidents to staff immediately.

**Job Responsibilities:** The Volunteer Coach works to develop a successful program by coordinating practices and games and working to engage with every child on the team.

**Essential Functions:**

- Incorporate and Model our YMCA core values into your work.
- Commit to establishing long-term relationships with staff, volunteers, participants, and families.
- Ability to establish and maintain harmonious relationships with players, parents and staff and give directions in an authoritative, yet tactful manner.
- Ability to adequately observe participant activities, enforce safety regulations and apply appropriate techniques.
- Visual and auditory ability to respond to critical incidents, and the physical ability to act swiftly in an emergency situation.
- Ability to lift up to 40lbs.

**Required Qualifications:**

- Must pass YMCA background check
- Must complete coach's packet

**Preferred Qualifications:**

- Experience in coaching children's sports teams
- Experience coaching in specified sport





Notice to Applicants/Employees/Volunteers: We make every effort to prevent child abuse, and conduct multi-state background checks.

**VOLUNTEER APPLICATION – YOUTH SPORTS**

**CIRCLE LOCATION**

Westside Mt. Hood Clackamas Sherwood Clark County Beaverton  
Hoop YMCA

ASSISTANT COACHES CHECK HERE

**VOLUNTEER HEAD COACH AND ASSISTANT COACH APPLICATION**

Notice to Applicants/Employees/Volunteers: We make every effort to prevent child abuse, and conduct multi-state background checks.

\_\_\_\_\_ Full Name

\_\_\_\_\_ Home Phone

\_\_\_\_\_ Street Address

\_\_\_\_\_ City

\_\_\_\_\_ State

\_\_\_\_\_ Zip

\_\_\_\_\_ Daytime or Message Phone

\_\_\_\_\_ Emergency Phone Number

\_\_\_\_\_ E-Mail Address

\_\_\_\_\_ Volunteer Location

What days and times are you available to volunteer?

Day of Week	M	T	W	Th	F	Sa	Su
Time Available							

Does your employer match monetary contributions or contribute money for volunteer hours?  
YES NO

Are you volunteering for Community Service? YES NO

Are you volunteering as an internship? If so what college? \_\_\_\_\_

Have you previously volunteered or been employed at a YMCA? YES NO

Why are you interested in volunteering? \_\_\_\_\_

What skills and training qualify you for this volunteer position?

\_\_\_\_\_  
\_\_\_\_\_

What are some of the skills, talents and interests that you would enjoy sharing?

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Please list previous volunteer experiences and any volunteer experiences where you worked with children.

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Additional Information:

Have you ever been convicted of a felony or a felony offense against a person or any misdemeanor or felony offense in which the victim was a minor in any state at any time, including convictions that have been expunged, sealed, set aside, or otherwise removed from your criminal history record, including convictions that you have been told by legal authorities you need not report, but not including convictions that have been expunged pursuant to ORS 419A.260 and ORS 419A.262? If yes, please report the crime for which you were convicted, date of conviction and state where conviction occurred. \_\_\_ Yes \_\_\_ No If yes, please explain

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I voluntarily authorize YMCA of Columbia-Willamette and its agents to obtain criminal background information about me, including but not limited to, information that was expunged, sealed, set aside or otherwise removed from my criminal record history but not including convictions that have been expunged pursuant to ORS 419A.260 and ORS 419A.262 for volunteer purposes in connection with my application and hire for employment with the YMCA. I also authorize and direct law enforcement authorities, court personnel and any other public or private officer or person, to disclose all of the aforesaid information, without condition or qualification, to the YMCA of Columbia-Willamette. I specifically authorize YMCA of Columbia-Willamette to obtain consumer reports from consumer reporting agencies including, but not limited to, Criminal Info Services, Inc. (CIS) for employment purposes. I understand I have rights under FCRA as indicated in the Fair Credit Reporting Act Disclosure Notice I will receive if offered to volunteer with YMCA of Columbia-Willamette. (\_\_\_\_\_ Initial here)

You are advised that the YMCA of Columbia-Willamette may request a fingerprint based criminal records check for the purposes of evaluating your fitness as an employee. You may obtain a copy of the record check report from, or challenge the accuracy or completeness of the record check report, through the Oregon State Police or Washington State Patrol identification services section or the Federal Bureau of Investigation. (\_\_\_\_\_ Initial here)

**The YMCA of Columbia-Willamette’s efforts to attract the highest quality volunteers, I have been advised that, as a part of the application process for volunteer service with the YCMA, an extensive inquiry will be made concerning my prior employment, activities, character, and I fully consent to and authorize all such inquiries. If the YMCA accepts my volunteer service, I will comply with all policies and procedures established by the organization. I authorize the YMCA to request my employment record from any former employer(s). I further understand that inquiries may be made concerning my background, experience, and prior employment. I hereby waive any right to claim that any request or investigation is an invasion of my privacy, since it is made with my consent and it is in my interest that I be considered for volunteer service. I understand that my continued involvement as a volunteer is contingent upon a clean criminal history background check.**

I understand that it is this YMCA’s policy to secure conviction-only criminal history information as a part of the screening process for volunteers. I have provided the following information for the sole purpose of the YMCA’s obtaining a conviction-only criminal history file search. I understand that they YMCA of Columbia-Willamette do not condone child abusers and that the YMCA will be seeking information in my background related to child abuse.

Full Name \_\_\_\_\_

Maiden name/names previously used \_\_\_\_\_

Previous states lived in the last seven years \_\_\_\_\_

I certify that all statements made by me on this application are true to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand and agree that any misrepresentation or omission of facts would exclude my being considered for volunteer service or, after my service begins, may be cause for termination. I understand that the YMCA will take seriously any allegations or suspicions of child abuse and will report such allegations to the police and state agencies for investigation. I also understand that the YMCA strongly discourages any fraternization outside of YMCA programs between volunteer staff members and youth participants. I understand that if a volunteer wishes to fraternize due to a family relationship or longstanding friendship with a participant, or the participant's family, such fraternization should be disclosed to the volunteer's immediate supervisor. Furthermore, it should not take place without the presence of another adult. I understand that written approval of such fraternization must be obtained from the supervisor or another YMCA representative. All other personal contact between volunteer staff members and youth participant is prohibited. I understand and agree that if my service as a volunteer is accepted, there is no contract period for volunteer service and my volunteer service would be solely "at will", giving either the YMCA or me the right to terminate my volunteer service at any time without liability or obligation.

**I hereby acknowledge that I have read and understand the above statement and that I voluntarily sign this application.**

\_\_\_\_\_  
**Signed**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of parent or Guardian if applicant is under 18**

\_\_\_\_\_  
**Date**

Insurance Information:

Thank you for volunteering your time with the YMCA of Columbia-Willamette. We hope this will prove to be a rewarding experience for you. As a volunteer, you are *not* covered by the YMCA's Worker's Compensation program. You are, therefore, urged to have your own health insurance in ever the event you are injured while performing your volunteer duties. The YMCA carries insurance for accidental injury for the public arising from our programs, which will protect you in the event of property damage or accidental injury to the public as a result of your performance or volunteer duties assigned by the YMCA of Columbia-Willamette.

**I HAVE READ AND UNDERSTAND THE ABOVE INFORMATION ON VOLUNTEERS AND INSURANCE**

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_



**FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY**

**NOTICE AND AUTHORIZATION CONCERNING CONSUMER  
AND INVESTIGATIVE CONSUMER REPORTS (Fair Credit Reporting Act)**

This form, which you should read carefully, has been provided to you because the YMCA may request consumer reports or investigative consumer reports in connection with your application for employment, or at any time during the course of your employment with the YMCA, if any, for purposes of evaluating your suitability for employment, promotion, reassignment or retention as an employee. Additionally, in the event that claims or disputes between you and the YMCA are filed with any third parties, the YMCA may request consumer reports or investigative consumer reports for purposes of evaluation and response, regardless of whether you remain in the employ of the YMCA at the time such claims or disputes arise.

The types of reports that may be requested from consumer reporting agencies under this policy include, but are not limited to, credit reports, criminal records checks, court records checks, driving records, and/or summaries of educational and employment records and histories. The information contained in these reports may be obtained by a consumer reporting agency from public record sources or through personal interviews with your co-workers, neighbors, friends, associates, current or former employers, or other personal acquaintances. (please see summary of Your Rights Under the Fair Credit Reporting Act, which is included)

**AUTHORIZATION**

I have carefully read and understand this notice and authorization form and, by my signature below, consent to the release of consumer or investigative consumer reports, as defined above, to the YMCA (1) in conjunction with my application for employment, (2) during the entire course of my employment, if any, and (3) after any such employment ends. I further understand that any and all information contained in my job application or otherwise disclosed to the YMCA by me before, during or after my employment, if any, may be utilized for the purpose of obtaining the consumer reports or investigative consumer reports requested by the YMCA and confirm that all such information provided in connection with my job application is true and correct. I understand and acknowledge that nothing in this notice and authorization is intended to be, or is, an offer of employment or a promise of continued employment. If employed by the YMCA, my employment will not be for a specified period of time and can be terminated at any time for any reason, with or without cause or notice, by me or by the YMCA.

\_\_\_\_\_  
Name (Printed)

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Name of County in which you reside

\_\_\_\_\_  
Date of birth (mm/dd/yy)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



# **YMCA of Columbia-Willamette Code of Conduct for Staff and Volunteers who Work with and around Children**

Note: "Staff" applies to both paid employees and volunteers.

1. In order to protect YMCA staff, volunteers, and program participants, at no time during a YMCA program may a staff person be alone with a single child where he or she cannot be observed by others. As staff supervise children, they should space themselves in a way that other staff can see them.
2. Staff shall never leave a child unsupervised.
3. Restroom supervision: Staff will make sure the rest room is not occupied by suspicious or unknown individuals before allowing children to use the facilities. Staff will stand in the doorway of the rest room while children are using the rest room. This policy allows privacy for the children and protection for the staff (not being alone with a child). If staff are assisting younger children, doors to the facility must remain open. No child, regardless of age, should ever enter a restroom alone on a field trip or at another off-site location. Always send children in threes (known as the rule of three) and, whenever possible, with staff.
4. Staff should conduct or supervise private activities in pairs-- diapering, putting on bathing suits, taking showers, and so on. When this is not feasible, staff should be positioned so that they are visible to others.
5. Staff shall not abuse children including:
  - Physical abuse such as striking, spanking, shaking, kicking or slapping
  - Verbal abuse such as humiliating, degrading, threatening
  - Sexual abuse such as touching or speaking inappropriately
  - Mental abuse such as shaming, withholding kindness, cruelty
  - Neglect such as withholding food, water, basic care, etc.No type of abuse will be tolerated and may be cause for immediate dismissal.
6. Staff must use positive techniques of guidance, including redirection, positive reinforcement, and encouragement rather than competition, comparison, and criticism. Staff will have age-appropriate expectations and set up guidelines and environments that minimize the need for discipline. Physical restraint is used only in predetermined situations (necessary to protect the child or other children from harm), administered in a prescribed manner, and must be documented in writing
7. Staff will conduct a health check of each child upon his or her arrival each time the program meets, noting any fever, bumps, bruises, burns and so on. Questions or comments will be addressed to the parent or child in a non-threatening way. Staff will document any questionable marks or responses.
8. Staff will respond to children with respect and consideration and will treat all children equally regardless of sex, race, religion, culture, economic level of the family, or disability.

9. Staff will respect children's right not to be touched or looked at in ways that make them feel uncomfortable, and their right to say no. Other than diapering, children are not to be touched on areas of their bodies that would be covered by a bathing suit.
10. Staff will refrain from intimate displays of affection toward others in the presence of children, parents, and staff.
11. Staff are not to transport children in their own vehicles or allow youth participants old enough to drive to transport younger children in the program.
12. Staff must appear clean, neat, and appropriately attired.
13. Using, possessing, or being under the influence of alcohol or illegal drugs during working hours is prohibited.
14. Smoking or use of tobacco in the presence of children or parents during working hours is prohibited.
15. Possession or use of any type of weapon or explosive device is prohibited.
16. Using YMCA computers to access pornographic sites, send e-mails with sexual overtones or otherwise inappropriate messages or develop online relationships is not allowed.
17. Profanity, inappropriate jokes, sharing intimate details of one's personal life, and any kind of harassment in the presence of children, parents, volunteers, or other staff is prohibited.
18. Staff must demonstrate physical and psychological conditions that will not adversely affect children's physical or mental health. If in doubt, an expert should be consulted.
19. Staff will portray a positive role model for youth by maintaining an attitude of loyalty, patience, courtesy, tact, and maturity.
20. Staff may not be alone with children they meet in YMCA programs outside of the YMCA. This includes, but is not limited to, babysitting, sleepovers, driving or riding in cars, and inviting children to their homes. Any exceptions require a written explanation before the fact and are subject to administrator approval. Furthermore, it should not take place without the presence of another adult.
21. Staff should not give excessive gifts (e.g., TV, videogames, jewelry) to youth.
22. Staff may not date program participants who are under the age of 18.
23. Under no circumstances should staff release children to anyone other than the authorized parent, guardian, or other adult authorized by the parent or guardian (written parent authorization on file with the YMCA).
24. Staff are to report to a supervisor any other staff or volunteer who violates any of the policies listed in this Code of Conduct.
25. Staff are required to read and sign all policies related to identifying, documenting, and reporting child abuse and attend trainings on the subject, as instructed by a supervisor.

26. Staff will act in a caring, honest, respectful, and responsible manner consistent with the mission of the YMCA.

I understand that any violation of this Code of Conduct may result in termination of employment/volunteerism.

\_\_\_\_\_  
Employee or Volunteer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

**TELEPHONE REFERENCE CONFIRMATION (Complete three checks)**

Employee/Volunteer Name \_\_\_\_\_ Position \_\_\_\_\_ Staff/ Caller \_\_\_\_\_

Optional Script: "Hello, my name is *(your name)* and I am the *(title)* with the YMCA of Columbia-Willamette. I am calling in reference to *(applicant)*, who has given me your name as a reference to verify his/her character and abilities to work at the YMCA. This call will be kept confidential and will only be used to determine if *(applicant)* has the abilities that are appropriate to work as a *(position)*. If you have the time, I would like to ask you a few questions that will help us to determine if *(applicant)* will be successful in this position."

	Employment Reference 1	Employment Reference 2	Employment Reference 3
Date			
Name of Employer/Phone Number Contact Name			
How long have you known the Applicant? / Dates of Employment?			
In what capacity?			
Is this employee re-hireable?			
This applicant will be working for an organization that works with children. Do you feel this is appropriate?			
Is there any other information that you would like to share to aid us in assessing the applicant's capabilities?			

Personal References/Phone Number      Comments


Signature of Staff Member Checking References \_\_\_\_\_ Date Completed \_\_\_\_\_

Please attach any additional reference check information that you obtain.  
Submit program specific reference questions/forms to Human Resources.  
All applicants should have one relative as a reference.

**YMCA OF COLUMBIA-WILLAMETTE VOLUNTEER ACKNOWLEDGEMENTS**  
**PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING THIS APPLICATION**

I understand that I am to immediately report accidents or injuries of participants or myself to my supervisor. I also understand that volunteer positions are *not* covered under Worker's Compensation Insurance.

\_\_\_\_\_  
initial

I understand that the YMCA of Columbia-Willamette makes an active effort to prevent child abuse and thus requires that all volunteers have background checks and attend Child Abuse Prevention Training.

\_\_\_\_\_  
initial

I understand that smoking or use of tobacco products, using, possessing or being under the influence of alcohol or illegal drugs is prohibited and will not be tolerated.

\_\_\_\_\_  
initial

I understand that if chosen for a volunteer position, I will receive neither monetary compensation nor a membership to the YMCA of Columbia-Willamette as a benefit of volunteerism.

\_\_\_\_\_  
initial

I understand that I am required by law to report known or suspected instances of child abuse to my supervisor or branch director. It is the policy of the YMCA to cooperate with the authorities conducting investigations of suspected child abuse.

\_\_\_\_\_  
initial

I understand that all volunteers are subject to dismissal at the discretion of the YMCA of Columbia-Willamette and volunteer positions are for no specified term. If in the event I choose to cease volunteering, I am free to do so at any time. I understand that if YMCA programs are dependent upon my agreed attendance, I will give the YMCA of Columbia-Willamette ample notice of intentions to cease volunteering.

\_\_\_\_\_  
initial

I understand that if selected to volunteer, any misrepresentations made by my completing this application shall be considered as sufficient cause for my dismissal without advance notice.

\_\_\_\_\_  
initial

I understand that in the event of my selection, I will comply with all rules and regulations set forth by the YMCA of Columbia-Willamette.

\_\_\_\_\_  
initial

I understand that volunteers will not fraternize with children outside the programs, including babysitting or inviting children home. No exceptions will be made.

\_\_\_\_\_  
initial

I understand that completion of this form does not guarantee me status as a volunteer. I must meet all stated conditions required of the position for which I am asking to be considered.

\_\_\_\_\_  
initial

I understand that information concerning my past record may be sought from employers, references and organizations for which I may have volunteered. I hereby release from all liability or damage those individuals, organizations or corporations who provide such information.

\_\_\_\_\_  
initial

PRINTED NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_