FROST VALLEY YMCA
Volunteer Application

Thank you for considering the Frost Valley YMCA as a place to donate your time and talents. Volunteers are vital to our organization, as you enable us to meet the many needs of those whom we serve. Volunteers are defined as those individuals who contribute their time and talents in community service. Thank you for your cooperation in this effort and your interest in the Frost Valley YMCA. If you have any questions about this or any part of our application process, please contact Human Resources, at 845-985-2291 ext. 254.

Today's Date _____

Last Name _____ First Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

Background
How did you learn about volunteer opportunities with Frost Valley YMCA?

_____

Why would you like to volunteer?

_____

Skills & Training
Please list your applicable skills and interests

_____

Work Experience (related to above skills)

_____

Certifications

_____

References
Please list three people whom you have known for at least two years and who know you well enough to provide us with a reference.

Name	Address	Phone	Occupation

FROST VALLEY YMCA
Background Check

DISCLOSURE AND AUTHORIZATION FORM TO OBTAIN CONSUMER REPORTS FOR EMPLOYMENT/VOLUNTEER/MEMBER PURPOSES

Please Read Carefully Before Signing the Authorization

DISCLOSURE

In considering you for employment and, if you are employed, in considering you for subsequent promotion, assignment, reassignment, retention, or discipline, Frost Valley YMCA may request and rely upon one or more consumer reports or investigative consumer reports about you that we obtain from a consumer reporting agency, such as IntelliCorp Records, Inc.

For explanation purposes:

- a "consumer report" is a written, oral or other communication of any information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in making an employment-related decision about you. Such information may include, for example, credit information, criminal history reports, or driving records; and

- an "investigative consumer report" is a consumer report in which information on your character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with your prior employers, neighbors, friends, or associates, or with others who may have knowledge concerning any such items of information. In the event an investigative consumer report is requested about you, you are entitled to additional disclosures regarding the nature and scope of the investigation requested, as well as a written summary of your rights under the Fair Credit Reporting Act ("FCRA").

Under the FCRA, before Frost Valley can obtain a consumer report or investigative consumer report about you for employment purposes, we must have your written authorization. Before we take adverse action on the basis, in whole or in part, of information in that report, you will be provided a copy of that report, the name, address, and telephone number of the consumer reporting agency, and a summary of your rights under the FCRA.

AUTHORIZATION

I have read and understand the foregoing Disclosure, and authorize Frost Valley YMCA to obtain and rely upon consumer reports or investigative consumer reports in considering me for employment and, if I am employed, in considering me for subsequent promotion, assignment, reassignment, retention, or discipline, may obtain annual reports during employment. By my signature below, I authorize Frost Valley YMCA to obtain any such reports and to share the information received with any person involved in the employment decision about me.
(This will authorize immediate inquiries to the Human Resources Department and to any listed supervisors or references in the Employment/Reference Section of your application.)

EMPLOYEES: I do ☐ do not ☐ authorize you to contact *my current* employer for Employment and Reference Verifications

VOLUNTEERS: I do ☐ do not ☐ authorize you to run a complete criminal background check.

VISITORS: I do ☐ do not ☐ authorize you to run a complete criminal background check.

RESEARCHERS/VENDORS/MEMBERS: I do ☐ do not ☐ authorize you to run a complete criminal background check.

ORGANIZATION AFFILIATION: _____

PLEASE CHOOSE ONE

I also agree that this Disclosure and Authorization in original, faxed, photocopied, or electronic (including electronically signed) form will be valid for any consumer reports or investigative consumer reports that may be requested about me by or on behalf of **Frost Valley YMCA**.

Applicant Signature Date

PERSONAL DATA

Last Name First Name Middle Name

Current Address City State Zip Code

_____
Dates Lived Here

Addresses for the Past Seven Years: (include street, city, state, zip code)	Dates of Residence

Date of Birth Other Names Used (including maiden name) Years Used

_____
Social Security Number

I have the right to make a request to **IntelliCorp Records, Inc**, upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including sources of information, and the recipients of any reports on me which **IntelliCorp Records, Inc** has previously furnished within the two-year period preceding my request.

I certify that all elements of the personal data I have provided are true, accurate and complete. I understand and agree that any omission, false statement, misleading statement, or answer made by me on my application or any supplements to it and in any interviews will be sufficient grounds for rejection of employment and my discharge after employment.

Printed Name Applicant Signature Date

Office Use Only:

Date received: _____ Date processed: _____ Organization Affiliation: _____

Responsible Staff Member: _____ Processed by: _____

FROST VALLEY YMCA
Motor Vehicle Report

Authorization for Motor Vehicle Report

Date: _____

YMCA
Attention: Human Resource Dept.

Dear YMCA:

I am aware that consumer and motor vehicle reports may be obtained as part of the YMCA's evaluation of my job application and/or employment. The reports may be procured by the YMCA or its insurance company representative(s), and may include personal information obtained from state motor vehicle departments, my driving record, an assessment of my insurability for the insurance program, or other consumer reports.

By signing this letter, I hereby provide my authorization for the YMCA or their insurance company representative(s) to procure such information and reports, as well as additional reports about me from time-to-time as deemed appropriate, to evaluate my insurability or for other permissible purposes.

Sincerely,

_____

Signature Applicant/Employee

_____

Name as it appears on Driver's License

_____

Driver's License Number/State of Issuance

_____

Date of Birth

ADDRESS 2000 Frost Valley Rd, Claryville, NY 12725 **TEL** 845-985-2291 **EMAIL** info@frostvalley.org