



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

Summit Area YMCA Summer VolunTEENS Program

Deadline to apply: Thursday, April 20, 2017

Are you a middle or high school student interested in volunteering during the summer or do you need community service hours to fulfill an organizational requirement? If so, look no further than the Summit Area YMCA.

What is the YMCA Summer VolunTEENS Program?

The Summer VolunTEENS Program at the Summit Area YMCA is designed for high school students who want to help their communities by volunteering their time for 4 weeks starting July 3, 2017.

What Do VolunTEENS Do?

As a VolunTeen, you will have a chance to experience different volunteer opportunities within the Y and at several local non-profit organizations.

VolunTEENS rotate each week among four non-profit organizations on a flexible time schedule to meet the demands of each organization (3-5 days per week between the hours of 8:00 am – 5pm). All are located within the Summit area and the teens will need their own transportation to the locations.

Organizations & Opportunities:

WEEK	NON-PROFIT / LOCATION	TIME	DESCRIPTION OF VOLUNTEER OPPORTUNITY
4/28 OR 5/1	Summit YMCA 67 Maple Street Summit, NJ	4-5pm (28th) 6-7pm (1 st)	Interview Dates for Potential VolunTEENS *VolunTEENS must be able to make one of the following two times*
6/26/2017	Summit YMCA 67 Maple Street Summit, NJ	4:00-5:00pm	Orientation Meeting for the VolunTEENS program.
#1 7/3-7/7 (No 7/4)	Trailside Nature Center 452 New Providence Road, Mountainside, NJ	8:30-4:15pm	VolunTEENS will assist Trailside in their camp experience, working with counselors to offer crafts, games, and more for young campers. * No July 4 (Please note there will be a mandatory trailside orientation session that students must attend- date TBD)
#2 7/11-7/12	Reeves Reed Arboretum 165 Hobart Avenue Summit, NJ	9:30-11:30pm	VolunTEENS will participate in the Horticultural classes as well as assist staff in prepping for camp.
#2 7/13	America's Grow A Row**	9:00-3pm	VolunTEENS will meet at the Y and then be transported to America's Grow a Row where they'll get the opportunity to work on the fields and help with planting and harvesting.
#3 7/17	Summit YMCA 67 Maple Street Summit, NJ	10-1pm	VolunTEENS will learn interview skills as well design a craft for seniors at the YMCA!
#3 7/18	Imagine ** 24 Sheffield Street, Westfield, NJ	9:30-2:30pm	Volunteers will visit Imagine, spend some time gardening and crafting as well learn about the center for grief and loss.
#3 7/19	Wagner Arboretum ** 197 Mountain Avenue, Warren, NJ	8:30-12:30pm	VolunTEENS will assist in the Wagner gardens planting, harvesting, and help to clear the beds.
#3 7/20	NJ Sharing Network 691 Central Avenue New Providence, NJ	9:30-1:30pm	"Day of Service" with NJSN. Teens will get a tour of the facility, interact with employees as well as participate in a small volunteering opportunity while there.
#4 7/25-28	Sage Eldercare 290 Broad Street Summit, NJ	11:45-3:15pm	VolunTEENS will provide assistance in the 'Spend a Day' senior day care center assisting with activities, lunch, games, and companionship.
8/4	Central Presbyterian Church 70 Maple Street & Wrap-Up Event 67 Maple Street	9-11:30 11:30-12:30	VolunTEENS will help Summit area families prepare lunches, tie cozy blankets and make up hygiene packs for area people experiencing homelessness. Then, students will head back to the Y for their Wrap Party!

** Transportation provided by Summit YMCA



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THE VOLUNTEENS PROGRAM CAN...

- Enable you to help others in your community.
- Give you work experience for job applications.
- Help you stand out on college and scholarship applications.
- Fulfill school or other service requirements.
- Help you explore future careers while learning new skills.
- Expose you to new people and experiences.
- Be Fun!

REQUIREMENTS TO BE SELECTED AS A VOLUNTEEN:

- 14-16 years old.
- Pass a screening interview.
- Attend a volunteer orientation.
- Feel comfortable working with youth, young adults and the elderly.
- Have a reliable means of transportation to get to and from your volunteer jobs.
- Be friendly, dependable and trustworthy.
- Available during the period of July 3 to August 4, 2017.

How the process works:

1. Read the information here and talk with your parents or guardians about your interest in volunteering.
2. Decide if you can meet the time commitment of this volunteer program and talk about how you'll get to and from your volunteer jobs. Make sure you have transportation before you sign up for the VolunTeens Program.
3. Please complete the attached Application and Essay Questions as thoroughly as possible. All answers given on the student application portion must be completed in your own words. Feel free to type responses and use extra pages as necessary.
4. Complete the Acceptance and Permission Statement form. A parent or guardian must also sign and provide an email address used for confirmation purposes.

ONLY FULLY COMPLETED APPLICATION PACKETS (Application, Essays, Acceptance & Permission Statement) WILL BE ACCEPTED so be sure to verify all forms have been submitted.

Please mail all documents to the address below or email to Julie.Wagenblast@theSAY.org by Thursday, April 20, 2017

Summit Area YMCA
Summer VolunTeens Program
67 Maple Street, Summit, NJ 07901

6. A staff member will contact you to schedule an interview on either **April 28th or May 1st** to discuss your interests. Potential candidates will be invited to have an interview with the Summit Area YMCA VolunTeens selection committee to be considered for the program.
7. To ensure the safety of our members and the children we service, we will also do 3 reference checks. Prior to starting, you will be required to attend a mandatory orientation on June 26, 2017; more information will follow on this.
8. Then you'll be a Summit Area YMCA VolunTeen!
9. At the conclusion of your VolunTeens service, you will be evaluated on your ability to perform assigned duties as well as receive a letter stating hours completed in the program. For further questions, please contact: Julie Wagenblast at 908-273-3330, ext.1140 or julie.wagenblast@theSAY.org

BERKELEY HEIGHTS YMCA

A branch of the Summit Area YMCA.

550 Springfield Avenue | (P) 908 464 8373
Berkeley Heights, NJ 07922 | (F) 908 508 1059

SUMMIT YMCA

A branch of the Summit Area YMCA.

67 Maple Street | (P) 908 273 3330
Summit, NJ 07901 | (F) 908 273 0258

THE LEARNING CIRCLE YMCA

A branch of the Summit Area YMCA.

95 Morris Avenue | (P) 908 273 7040
Summit, NJ 07901 | (F) 908 273 5670

www.theSAY.org



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The Summit Area YMCA is one of the area's leading charitable 501(c)3 organizations. Our programs and services are open to all through our financial assistance programs made possible through the generosity of our members, donors and partners. To help us help others, make your tax-deductible donation today at www.theSAY.org



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**SUMMER VOLUNTEENS PROGRAM APPLICATION
DEADLINE TO APPLY: THURSDAY, APRIL 20, 2017**

Student Name _____ Email Address (mandatory) _____

Address _____ City _____ State _____ Zip _____

Phone (Home) _____ (Student Cell mandatory) _____ Date of Birth: ____/____/____

Name of High School: _____ Year of Graduation: _____

Parent/Guardian's Name(s): _____

Parent/Guardian's Address (if different from above): _____

City: _____ Zip: _____ Phone: _____ Emergency

Contact _____ Relationship: _____ Phone _____ Are you a

member of the Summit Area YMCA (not a requirement) Yes ___ No ___

Skills and Interests _____

Previous volunteer experience (if any):

Why do you want to volunteer?

Are there any days you will not be able to attend Volunteens? If so, please list here: (PLEASE NOTE THAT MORE THAN A WEEK'S ABSENCE WILL AUTOMATICALLY DISQUALIFY YOU FROM THE PROGRAM)

Volunteer Interests (please check all that apply):

Acting__ Arts__ Aquatics__ Camp__ Community projects __ Children __ Reading__ Seniors__ Sports__ Music __

Have you ever worked with children? Yes ___ No___ Please explain _____

How did you learn about our VolunTeens program? _____

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Personal References:

Please list three references, including a close family member, who have known you for at least one year.

Work Reference _____ Family Reference (Relationship) _____ Other Reference _____ Years Known _____
Name _____ Occupation _____ Home
Phone _____ Work Phone _____ Cell Phone _____ Home or Email
Address _____

Work Reference _____ Family Reference (Relationship) _____ Other Reference _____ Years Known _____
Name _____ Occupation _____ Home
Phone _____ Work Phone _____ Cell Phone _____ Home or Email
Address _____

Work Reference _____ Family Reference (Relationship) _____ Other Reference _____ Years Known _____
Name _____ Occupation _____ Home
Phone _____ Work Phone _____ Cell Phone _____ Home or Email
Address _____

Do you have any pending charges or have you ever pled guilty or been convicted of a crime, felony, disorderly persons offense, drunk driving offense or other violation of law? Do not include convictions that have been annulled, expunged or sealed by a court. ___ NO ___ YES, detail

Answering yes to these questions does not constitute an automatic bar to volunteering but will be considered in relation to the positions:

I hereby certify that all of the facts set forth in my application are true and complete. I understand that if I engage as a Y Volunteer that any false information on this form or failure to disclose material facts will be considered grounds for discharge. I agree, as a volunteer, to abide by all established policies and procedures of the Y. I further understand that my services are on a volunteer basis for which no compensation or benefits (including workers' compensation) are provided and that these services are at will and may be terminated at any time by either party. The Y has my permission to obtain all necessary information from the references I have listed, or any other sources concerning my prior employment, volunteer, or personal history and I release all parties from any possible damages resulting from disclosing such information with or without prior written notice from me. I understand that all materials produced for the Summit Area YMCA by the volunteer are property of the Summit Area YMCA.

Signature X: _____ Date: _____

I consent that photographs taken of myself are property of the Summit Area YMCA and may be reproduced as the Y desires, free of any claim on my part.

X _____
Signature of Volunteer Applicant _____ Date _____

X Parent's Signature (for under 18) _____ Print Name _____ Date _____



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Summit Area Summer VolunTeens Program Acceptance & Permission Statement

ACCEPTANCE STATEMENT

I AGREE TO ATTEND THE SUMMER VOLUNTEENS PROGRAM (4 WEEKS). PLEASE NOTE THAT THIS IS A DAY PROGRAM AND THAT TRANSPORTATION TO AND FROM EACH DAILY SESSION IS YOUR RESPONSIBILITY.

X SIGNED: _____ DATE: _____
(STUDENT)

PERMISSION STATEMENT

I HEREBY GRANT PERMISSION FOR MY CHILD TO APPLY TO THIS PROGRAM AND FOR SELECTED REFERENCES TO REPORT MY CHILD'S ACHIEVEMENTS AND PERSONAL CHARACTERISTICS. I UNDERSTAND THAT IF MY CHILD IS ACCEPTED, WE WILL BE RESPONSIBLE FOR HIS/HER DAILY TRANSPORTATION TO AND FROM THE WORKSITE FOR THE DURATION OF THE PROGRAM.

I RECOGNIZE THAT PARTICIPATING IN THE VOLUNTEENS PROGRAM IS A PRIVILEGE AND IN CONSIDERATION THEREOF AM WAIVING ANY CLAIM OR RIGHT FOR PERSONAL INJURY OR PROPERTY DAMAGE ARISING OUT OF OR IN CONNECTION WITH THE PROGRAM. I AGREE TO INDEMNIFY AND HOLD HARMLESS THE SUMMIT AREA YMCA, ITS AGENTS, VOLUNTEERS AND EMPLOYEES FOR ANY AND ALL CLAIMS ARISING OUT OF OR IN CONNECTION WITH THE VOLUNTEENS PROGRAM.

PRINT PARENT NAME: _____

PARENT ADDRESS: _____

PARENT EMAIL: _____

PARENT SIGNATURE: _____ DATE: _____

Please return completed form to:
Summit Area YMCA Summer VolunTeens Program
67 Maple Street
Summit, NJ 07901
Attn: Julie Wagenblast
908-273-3330 Ext 1140 (phone)/ 908-273-0258 (fax)

APPLICATIONS ARE DUE APRIL 20, 2017