FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

SUMMIT AREA YMCA
Volunteer Application
Youth Coach
www.theSAY.org

Summit YMCA - 67 Maple Street, Summit NJ, 07901 (908)273-3330 FAX (908) 273-0258
Berkeley Heights YMCA - 550 Springfield Ave, Berkeley Heights, NJ 07922 (908) 464-8373 FAX (908) 508-1059
The Learning Circle YMCA - 95 Morris Avenue, Summit NJ 07901 (908) 273-7040 FAX (908) 273-5670
Association Services Office - 490 Morris Avenue Summit, NJ 07901 (908) 273-4270 FAX (908) 273-4272

The Summit Area YMCA considers applicants for all positions without regard to race, color, religion, gender, national origin, age, marital, civil union, or veteran status, sexual orientation, the presence of a non-job related medical condition or handicap, or any other legally protected status. The YMCA maintains a "zero tolerance" for child abuse and/or substance abuse. Criminal background check, references and other federal or state screenings for child abuse will be conducted.

Bold areas are required fields

Date _____

Name: _____ **Email Address:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone: Home: _____ Work: _____ Cell: _____

Occupation: _____ Employer: _____

Emergency Contact: _____ Phone: _____ Relationship: _____

Program of Interest: ☐ Soccer ☐ Basketball Age Group: _____ Is your child playing this season? ◯ Yes ◯ No

Position of Interest: ☐ Coach ☐ Assistant Are you a returning Coach? ◯ Yes ◯ No If so what year? _____

Partner with another coach: _____ Are you a member of The Summit Area YMCA? ◯ Yes ◯ No

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PERSONAL REFERENCES: List **three** references known for at least one year. **One** must be a close **family member**!

☒ Family Reference (Relationship _____) Years Known _____

Name _____ Occupation _____

Cell Phone _____ Work Phone _____ Home Phone _____

Email Address _____

☐ Work Reference ☐ Family Reference (Relationship _____) ☐ Other Reference Years Known _____

Name _____ Occupation _____

Cell Phone _____ Work Phone _____ Home Phone _____

Email Address _____

☐ Work Reference ☐ Family Reference (Relationship _____) ☐ Other Reference Years Known _____

Name _____ Occupation _____

Cell Phone _____ Work Phone _____ Home Phone _____

Email Address _____

Please fill out the following information. Y USA requests this information from YMCA Volunteers throughout the nation for demographic purposes.

Race: ☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American ☐ Hispanic or Latino
☐ Native Hawaiian or other Pacific Islander ☐ White ☐ Two or more races

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BACKGROUND CHECK AUTHORIZATION

FCRA NOTICE AND ACKNOWLEDGMENT

IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING ACKNOWLEDGMENT NEW ADDITIONS HAVE BEEN MADE JANUARY 2014 IN ORDER TO COMPLY WITH THE FCRA ARTICLE 13.

NOTICE REGARDING BACKGROUND INVESTIGATION

The Summit Area YMCA ("Company Name") may obtain information about you from a consumer reporting agency for volunteer purposes. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include, but is not limited to: employment and education verifications; social security number verification; criminal and civil court records; personal interviews; driving records; and/or any other public records or any other information bearing on your character, general reputation, personal characteristics and trustworthiness. These reports may be obtained at any time after receipt of your authorization and, if you are selected, throughout your affiliation with the Company. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. The report will be generated by **campbackgroundchecks.com** (1200 South Outer Road, Blue Springs, MO 64015/816-228-5255) or another outside organization. The scope of this notice and authorization is all-encompassing, however, allowing the Company to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if you are selected, throughout your affiliation with the Company to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report. In compliance with the **FCRA Article 613**, an email address and mailing address is required by each applicant in order for **campbackgroundchecks.com** to be able to send a consumer copy of any criminal records returned.

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the **NOTICE REGARDING BACKGROUND INVESTIGATION (above) and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT** (separate document) and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "Investigative consumer reports" at any time after receipt of this authorization and, if I am selected, throughout my affiliation with the Company. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by **campbackgroundchecks.com**, another outside organization acting on behalf of the Company, and/or the Company itself. I agree that a facsimile ("fax") or photographic copy of this Authorization shall be as valid as the original.

Minnesota and Oklahoma applicants only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company. [ ]
Applicants of New York Employers only: I acknowledge that by signing below, I have also received a copy of Article 23-A of the New York Correction Law, in compliance with Article 25 Section 380-g of the New York General Business Law.
California applicants only: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report if one is obtained by the Company at no charge whenever you have a right to receive such a copy under California law. [ ]

Full Name	First	Middle		Last	
Maiden Name, Previous Names or Aliases Used:	First	Middle		Last	
SSN:	**Date of Birth**:	Driver's License State:		Driver's License/ ID State #	
Current Address	Street	City	State	Zip	From
Previous Address	Street	City	State	Zip	From/ To
Previous Address	Street	City	State	Zip	From/ To
Phone #		**E-mail (REQUIRED)** *(Used to provide a copy of any criminal records returned)*			

Criminal History Disclosure

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 of other violation of law? Do not include convictions that have been annulled, expunged or sealed by a court.

◯ No ◯ Yes Details: _____

(Answering yes to the above question does not constitute an automatic bar to volunteering but will be considered in relation to the position sought.)

Signature _____ Date _____

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Summit Area YMCA Volunteer Application Youth Coach

Child Abuse Prevention
CODE OF CONDUCT

1. In order to protect Y staff, volunteers, and program participants – at no time during a Y program may a staff/volunteer be alone with a single child where they cannot be observed by others. As staff/ volunteers work with or supervise children, they should space themselves in a way that other staff can see them.

2. Staff/Volunteers shall never leave a child unsupervised.

3. Restroom supervision: No child, regardless of age, should ever enter a bathroom alone. Staff/Volunteers will make sure the restroom is not occupied by suspicious or unknown individuals before children enter. Children should be taken together as a group with staff/volunteers supervising. Staff/Volunteers will stand in the doorway while children are using the restroom. This policy allows privacy for the children and protection for the staff/volunteer (not being alone with a child).

4. Staff/Volunteers should conduct or supervise private activities in pairs – diapering, putting on bathing suits, taking showers, etc. When this is not feasible, staff/volunteers should be positioned so that they are visible to others.

5. Staff/Volunteers shall not abuse children including:
   - physical abuse – strike, spank, shake, slap;
   - verbal abuse – humiliate, degrade, threaten;
   - sexual abuse – inappropriate touch or verbal exchange;
   - mental abuse – shaming, withholding love, cruelty;
   - neglect – withholding food, water, basic care, etc.

   Any type of abuse will not be tolerated and may be cause for immediate dismissal.

6. Staff/Volunteers must use positive techniques of guidance, including redirection, positive reinforcement and encouragement rather than competition, comparison and criticism. Staff/Volunteers will have age appropriate expectations and set up guidelines and environments that minimize the need for discipline. Physical restraint is used only in pre-determined situations (necessary to protect the child or other children from harm), is only administered in a prescribed manner and must be documented in writing.

7. Staff/Volunteers will conduct a visual check of each child each day as they enter the program, noting any fever, bumps, bruises, burns, complaints of illness, etc. Questions or comments will be addressed to the parent or child in a non-threatening way. Any questionable marks or responses will be documented.

8. Staff/Volunteers respond to children with respect and consideration and treat all children equally regardless of sex, race, religion, culture.

9. Staff/Volunteers will respect children's rights to not be touched in ways that make them feel uncomfortable, and their right to say no. Other than diapering, children are not to be touched in areas of their bodies that would be covered by a bathing suit. Exceptions to this would include safety reasons and spotting in physical activities such as gymnastics and swimming.

10. Staff/Volunteers will refrain from inappropriate or unwelcome displays of affection toward others or children.

11. While the Y does not discriminate against an individual's lifestyle, it does require that in the performance of their services to the Y, they will abide by the standards of conduct set forth by the Y.

12. Staff/Volunteers 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. Profanity, inappropriate jokes, sharing intimate details of one's personnel life, and any kind of harassment in the presence of children or parents is prohibited.

16. Staff/Volunteers must be free of physical or psychological conditions that might adversely affect children's physical or mental health. If in doubt, an expert should be consulted.

17. Staff/Volunteers will portray a positive role model for youth by maintaining an attitude of respect, loyalty, patience, courtesy, tact, and maturity.

18. Staff/Volunteers may not be alone with children they meet in YMCA programs outside of the YMCA. This includes babysitting, sleepovers, and inviting children to your home. Any exceptions require a written explanation before the fact and are subject to administrator approval.

19. Staff/Volunteers are not to transport children in their own vehicles.

20. Staff/Volunteers may not date program participants under the age of 18 years of age.

21. Under no circumstance should staff/volunteers 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).

22. Staff/volunteers 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 their manager.

I understand that any violation of this Code of Conduct may result in termination of service activities.

Volunteer Signature _____ Date _____

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Child Abuse Reporting Procedures

The Summit Area YMCA advocates a positive guidance and discipline policy with an emphasis on positive reinforcement, redirection, prevention and the development of self discipline. At no time will the following disciplinary techniques be tolerated: physical punishment, striking, biting, kicking, squeezing, shaming, withholding food or rest room privileges, confining children in small locked rooms or verbal or emotional abuse.

An affectionate touch and the warm feelings it brings is an important factor in helping a child grow into a loving and peaceful adult. However, Y staff and volunteers need to be sensitive to each person's need for personal space (i.e., not everyone wants to be hugged). The Y encourages age appropriate touch that helps children develop feelings of trust, security and self esteem. However, at the same time, it prohibits inappropriate touch - touch that exploits a child or touch initiated by an adult for the adult's gratification, or other means of sexually exploiting children.

In the event that there is an accusation of child abuse, the Y will take prompt and immediate action as follows:

1. At the first report or probable cause to believe that child abuse has occurred, the employed staff person it has been reported to (supervisor) will notify the program director, who will then review the incident with the Y's Executive Director or his/her designate. However, if the program director is not immediately available, this review by the supervisor cannot in any way deter the reporting of child abuse by the mandated reporters. Most states mandate each teacher or child care provider to report information they have learned in their professional role regarding suspected child abuse. In most states, mandated reporters are granted immunity from prosecution.
2. The Y will make a report in accordance with relevant state or local child abuse reporting requirements and will cooperate to the extent of the law with any legal authority involved.
3. In the event the reported incident(s) involve a program volunteer or employed staff, the Executive Director will, without exception, suspend the volunteer or staff person from the Y.
4. The parents or legal guardian of the child(ren) involved in the alleged incident will be promptly notified in accordance with the directions of the relevant state or local agency.
5. Whether the incident or alleged offense takes place on or off Y premises, it will be considered job related because of the youth-involved nature of the Y.
6. Reinstatement of the program volunteer or employee staff person will occur only after all allegations have been cleared to the satisfaction of the persons named in #1 above.
7. All Y staff and volunteers must be sensitive to the need for confidentiality in the handling of this information, and therefore, should only discuss the incident with the persons named in #1 above.

All full time and part time employees and program volunteers must read and sign this policy.

Print Name _____ Signature _____ Date _____

Confidentiality Agreement

It is understood and agreed to that certain information shared between the Summit Area YMCA and its members, volunteers, employees and other individuals affiliated with the YMCA may be considered confidential. To ensure the protection of such information and in consideration of the agreement to disclose said information, the Recipient named below agrees as follows:

1. The confidential information to be disclosed by the Summit Area YMCA under this Agreement ("Confidential Information") can be described as and includes: Personal familial information, Social Security numbers, credit card numbers, personal financial information, donations and other organizational financial or proprietary information, employment information and any other disclosed information concerning the above that may be considered confidential, regardless of whether such information is designated as "Confidential Information" at the time of its disclosure.
2. Recipient shall use the Confidential Information only for the specific purpose or relationship that the Summit Area YMCA has designated and agreed.
3. Recipient shall limit disclosure of Confidential Information within the Summit Area YMCA including its directors, members, ,contractors, volunteers, vendors and/or employees having a need to know and shall not disclose Confidential Information to any third party (whether an individual, corporation, or other entity) without the prior written consent of Chief Executive Officer or Chief Operating Officer. Recipient shall have satisfied its obligations under this paragraph if it takes affirmative measures to ensure compliance with these confidentiality obligations by its employees, volunteers, members, contractors and others who are permitted access to or use of the Confidential Information.
4. If there is a breach or threatened breach of any provision of this Agreement, it is agreed and understood that the Summit Area YMCA shall have no adequate remedy in money or other damages and accordingly shall be entitled to injunctive relief; provided however, no specification in this Agreement of any particular remedy shall be construed as a waiver or prohibition of any other remedies in the event of a breach or threatened breach of this Agreement.

The Recipient acknowledges that (s)he has read and understands this Agreement and voluntarily accepts the duties and obligations set forth herein.

Print Name _____ Signature _____ Date _____

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Required Training

As a new volunteer, you will attend several orientations and trainings to familiarize yourself with the mission of the Y and to learn to protect yourself and others while at the Y. Before you begin coaching you must register and take the on-line Bloodborne Pathogens (BBP) and Child Abuse Prevention (CAP) trainings.

- http://firstnetcampus.com/Redwoods/entities/YMCA/login.htm
- Click "New user registration" at bottom of page.
- Select your state (New Jersey)
- Select "YMCA of Summit NJ"
- Enter access code 003927
- Fill out the registration information and create a user name and password
- Select a "All Courses"
- Select "Blood Bourne Pathogens" and then click enroll. Select Child Sexual Abuse prevention" and then click enroll.
- Go to "My Training" tab and select the Blood Bourne Pathogens training (about 45 minutes) and print out certificate of completion.
- Go to "My Training" tab and select the Child Sexual Abuse Prevention training (about an hour) and print out the certificate of completion.
- Give copies of certificates to Sports Director or send to volunteer coordinator.

_____
Initials

Volunteer Youth Coach Service Description

Summary: Under the direction of the sports director, provide a safe, fun and positive learning environment for youth participants. He/she is responsible for the instruction of one team in the Youth Super Sports League and serves as the ambassador for the team, relaying any communication to the team in a timely manner.

Essential Functions:

- Develop an understanding of the YMCA Youth Sports Philosophy and implement that philosophy into your own coaching.
- Attend all scheduled meetings and coaching certifications.
- Maintain patience with team players at all times.
- Be prepared and organized for all scheduled practices and games.
- Distribute YMCA information including flyers, schedules, rosters, etc. when necessary.
- Develop good player/coach relationship with team members
- Encourage all team members with positive reinforcement
- Lead team members to shake hands with the opponent following each game. Expectations:
- As an Ambassador for the Y, promote our commitment to Youth Development, Healthy Living and Social Responsibility.
- Demonstrate the Y's values of caring, honesty, respect and responsibility.
- Perform activities to the best of your ability.
- Maintain a safe environment.
- Provide feedback.
- Uphold attendance and schedule agreements - Call department manager at least one hour ahead if you are not able to arrive or will be late.

I have reviewed and understand the requirements of this Volunteer Service Position.

_____
Initials

Volunteer Handbook Receipt Acknowledgment and Agreement

I acknowledge that I have received a copy of the Summit Area YMCA Volunteer Handbook dated March 2013. I understand that it is my responsibility to read the Volunteer Handbook and to abide by the rules, policies, and standards specified in the Volunteer Handbook.

I understand that the computer, voicemail and email systems are the property of the Summit Area YMCA and I consent to the Summit Area YMCA accessing my use of these systems, the internet, and the intranet.

Print Name	Signature	Date