



# NEW CANAAN YMCA

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

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Dear Prospective Volunteer,

Thank you for considering the New Canaan YMCA as a place to donate your time and talents. Volunteers are vital to the YMCA and by opening up your heart and extending your hand to our Y community, you will be changing the lives of so many.

At the New Canaan YMCA, we offer Volunteer opportunities to learn new skills, lend your expertise, gain academic credit, meet new friends and, of course help people. Your experience here will be fun, challenging, and rewarding, Whether you are reading stories to children in our childcare center, helping the office with bulk mailings or serving on a committee, you will be helping others.

Applying to volunteer here at the New Canaan YMCA has specific requirements that need to be fulfilled. To begin the process, you will need to fully complete and submit the attached application. We take protecting the children in our programs very seriously here at the Y. Before you can begin volunteering, we will conduct a criminal background check on all candidates age 18 and older. All volunteers are also required to complete on-line trainings. We also would like you to be aware that there are no membership or program discounts associated with volunteering for the Y.

If you have any questions, please do not hesitate to contact me at [njezairian@newcanaanymca.org](mailto:njezairian@newcanaanymca.org) or by phone, (203)966-4528 ext. 157. I look forward to receiving your application.

Sincerely,

Nicki Jezairian  
Director of Community Engagement

**Enriching all people in spirit, mind, and body . . .**

**564 South Avenue • New Canaan, CT 06840 • Phone: (203) 966-4528 • Fax: (203) 972-7738  
[www.newcanaanymca.org](http://www.newcanaanymca.org)**

The New Canaan YMCA is a 501(c)(3) nonprofit organization that relies on private and public support to fulfill its charitable mission of service.



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All completed volunteer applications must be turned into Nicki Jezairian, Director of Community Engagement.

# New Canaan YMCA

## Volunteer Application

Today Date: \_\_\_\_\_

Available start date: \_\_\_\_\_

### General Information

"LEGAL NAME" \_\_\_\_\_ Nick Name \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Day ( ) \_\_\_\_\_ - \_\_\_\_\_ Evening ( ) \_\_\_\_\_ - \_\_\_\_\_

Email Address \_\_\_\_\_ Preferred contact \_\_\_\_\_

Age \_\_\_\_\_ DOB \_\_\_\_\_ Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Are you a member of the New Canaan YMCA? (Not a requirement)  Y  N how long? \_\_\_\_\_

Are you a member of any other YMCA? If yes, which Y? \_\_\_\_\_ How long \_\_\_\_\_

List organizations you are involved with and any offices held \_\_\_\_\_

Why do you want to volunteer for the New Canaan YMCA? \_\_\_\_\_

Are you volunteering to fulfill a School/Organization requirement or Internship?  Y  N

If yes, which School/Organization \_\_\_\_\_ Total Hours Required \_\_\_\_\_ Completed by: \_\_\_\_\_

Are you volunteering as part of an organization/business/club?  Y  N

If yes, which organization/club: \_\_\_\_\_

Are you volunteering to fulfill a court-ordered requirement?  Y  N

If yes, which court: \_\_\_\_\_ Total hours required: \_\_\_\_\_ Completed by: \_\_\_\_\_

### Volunteer experience, interests and time available

Have you ever volunteered before? If yes, where, and in what capacity? \_\_\_\_\_

How did you learn about the New Canaan YMCA's Volunteer program? \_\_\_\_\_

Have you worked with (check all that apply)

- Infants (0 – 1 yrs)
- Children (2 – 12yrs)
- Teens (13 – 17yrs)
- Adults (18 – 25yrs)
- Adults (26 – 35yrs)
- Adults (36 – 45)
- Adults (46 – 65)
- Adults (65+)

Please check all the below **department** volunteer opportunities that interest you

<input type="checkbox"/> Afterschool Child Care	<input type="checkbox"/> Community Outreach/Events	<input type="checkbox"/> Fundraising	<input type="checkbox"/> PR/Marketing	<input type="checkbox"/> Swim Team
<input type="checkbox"/> Aquatics	<input type="checkbox"/> Day Camp	<input type="checkbox"/> Girls on the Run	<input type="checkbox"/> Teens	<input type="checkbox"/> Synchronize Swim
<input type="checkbox"/> Arts	<input type="checkbox"/> Day Care	<input type="checkbox"/> Gymnastics	<input type="checkbox"/> Seniors	<input type="checkbox"/> Wellness
<input type="checkbox"/> Building and Grounds	<input type="checkbox"/> Diving	<input type="checkbox"/> Member Service	<input type="checkbox"/> Special Needs	<input type="checkbox"/> Y Guide and Princess
<input type="checkbox"/> Bouncing Bears	<input type="checkbox"/> Finance	<input type="checkbox"/> Office / Clerical work	<input type="checkbox"/> Sports	<input type="checkbox"/> Other

Please explain experience, if any, in the areas you have checked \_\_\_\_\_  
 \_\_\_\_\_

Please check all the below **committee** volunteer opportunities that interest you

<input type="checkbox"/> Building and Grounds	<input type="checkbox"/> Finance	<input type="checkbox"/> International	<input type="checkbox"/> Risk Management
<input type="checkbox"/> Child Care	<input type="checkbox"/> Golf Tournament	<input type="checkbox"/> Membership	<input type="checkbox"/> Community Events
<input type="checkbox"/> Development	<input type="checkbox"/> Human Resources	<input type="checkbox"/> Marketing	<input type="checkbox"/> Volunteers

Please explain experience, if any, in the areas that you have checked \_\_\_\_\_  
 \_\_\_\_\_

Please check the skills that apply to your experience.

<input type="checkbox"/> Organizing	<input type="checkbox"/> Art/Crafts
<input type="checkbox"/> Filing	<input type="checkbox"/> Photography/Video
<input type="checkbox"/> Music	<input type="checkbox"/> Communications
<input type="checkbox"/> Story telling	<input type="checkbox"/> Other _____

<b>Computer Skills</b> Are you more familiar with a <input type="checkbox"/> PC or a <input type="checkbox"/> MAC?  Which programs are you most proficient in? _____ _____ _____
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What day(s) and times to you have available to volunteer at the New Canaan YMCA?

Monday / Times \_\_\_\_\_  Thursday / Time \_\_\_\_\_  Sunday / Times \_\_\_\_\_  
 Tuesday / Times \_\_\_\_\_  Friday / Time \_\_\_\_\_  
 Wednesday / Times \_\_\_\_\_  Saturday / Times \_\_\_\_\_

If you have a time frame, how long would you like to volunteer at the New Canaan YMCA for?

\_\_\_\_\_

Is English your spoken language?  Y  N, If no what language do you speak? \_\_\_\_\_

Do you speak any additional languages?  Y  N if yes, what are they \_\_\_\_\_

## **Education and Certification**

**Note: formal education is not a requirement to volunteer, we welcome experience of all kinds**

	<b>Name and location</b>	<b>Course of study</b>	<b>Start and end dates</b>	<b>Did you graduate?</b>	<b>Degree or Diploma</b>
<b>Elementary &amp; Jr. High</b>					
<b>High School</b>					
<b>College</b>					
<b>Higher Education</b>					
<b>Trade / Business</b>					

Please list below any valid certifications you possess and there expiration dates

Cert \_\_\_\_\_ Exp.Date \_\_\_\_\_

Cert \_\_\_\_\_ Exp.Date \_\_\_\_\_

Cert \_\_\_\_\_ Exp.Date \_\_\_\_\_

## **Military History**

<b>Date of Entry</b>	<b>Date of Discharge</b>	<b>Branch of Service</b>	<b>Type of discharge</b>	<b>Final Rank</b>

**Did you attend service school or attend special training?**

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## **Residents History and Background**

Please list your last 2 addresses (excluding your current address) starting with the most resent.

<b>Street Address</b>	<b>City, State and Zip</b>	<b>From when to when</b>

Please list here any other names you have used in the Past (Maiden Name First) \_\_\_\_\_

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: \_\_Yes \_\_No if yes, please explain & include dates, court name & location.

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Pending charges or a conviction will not necessarily disqualify an applicant from volunteering but will be considered in relations to the taught.

**Employee History and References**

Please list your last three employers starting with the most recent

**Company Name** \_\_\_\_\_ **Address** \_\_\_\_\_

Job title and description \_\_\_\_\_

Name and title of immediate supervisor \_\_\_\_\_ Phone \_\_\_\_\_

**Company Name** \_\_\_\_\_ **Address** \_\_\_\_\_

Job title and description \_\_\_\_\_

Name and title of immediate supervisor \_\_\_\_\_ Phone \_\_\_\_\_

**Company Name** \_\_\_\_\_ **Address** \_\_\_\_\_

Job title and description \_\_\_\_\_

Name and title of immediate supervisor \_\_\_\_\_ Phone \_\_\_\_\_

**List 2 personal references other than relatives and employers**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Number of years known \_\_\_\_ Address \_\_\_\_\_

Phone ( ) \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Number of years known \_\_\_\_ Address \_\_\_\_\_

Phone ( ) \_\_\_\_\_

Please list the names of relatives, friends, or acquaintances employed by the YMCA and their relationship to you. \_\_\_\_\_

**Additional information**

Is there anything else you would like to share with us at this time? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**The information provided in this Volunteer Application is true, correct, and complete. I understand that any misstatement or omission of fact on this application may result in my dismissal or refusal of a volunteer position. I understand that the YMCA follows a "Volunteer at will" policy, which means that Volunteers can be terminated with or without cause and with or without notice at any time at the option of either the New Canaan YMCA or the Volunteer. I authorize all individuals, schools, and firms named therein, to provide any information requested about me, and I release them from all liability for damage in providing this information. If offered a volunteer position, I agree to uphold the values and mission of the New Canaan YMCA.**

Applicant's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Parent / Guardian signature (if applicant is under 18 years of age).

Parent Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**For office use only**

Date received \_\_\_\_\_

Date reviewed \_\_\_\_\_

Department placed \_\_\_\_\_