



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Shasta Family YMCA

Teen Volunteer Application

(14-17 years old)

1. Complete the application, including the teen reference, and return it to the YMCA.
2. You will be called to schedule a Volunteer Orientation when there is an opening that meets your availability.
If you have any questions, please ask to speak to a Family Activities Coordinator.

Name _____
Last First

Address _____
Street City State Zip

Email _____

Phone # _____ Alternate Phone # _____

Parent/Guardian Name _____ Phone # _____

Please list two references: (over the age of 18):

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

I am interested in volunteering in: (Circle all that apply. See back for description.)

Childwatch (6 weeks – 5 years) Kid Zone (4-12 years)

What is your availability? Shifts are scheduled in three-hour increments for Childwatch, Kid Zone & Computer Lab.

Monday 8am-8pm _____ Tuesday 8am-8pm _____ Wednesday 8am-8pm _____

Thursday 8am-8pm _____ Friday 8am-6:30pm _____ Saturday 8am-4pm _____

Sunday 12noon-4pm _____

Are you a current YMCA member? Yes No

Have you ever been employed and/or part of a program at the Shasta Family YMCA? Yes No

If yes; when and what position/program _____

Please list any relatives that are employed and/or part of a program at the Shasta Family YMCA.

Name _____ Position _____ Relationship _____

Name _____ Position _____ Relationship _____

Special Talents or Interests _____

Shasta Family YMCA

Childwatch Volunteer duties include but are not limited to: caring for children ages six weeks to five years, reading and playing with children, escorting children to the restroom, greeting parents and children upon entering and departing from the room, offering snacks, possible lifting of infants and toddlers, and providing a safe, happy, and healthy place for children to play while members make use of the many programs and equipment throughout the facility.

Kid Zone Volunteer duties include but are not limited to: supervising and playing with children ages four to twelve years old, escorting children to the restroom, facilitating outside play on the playground as well as the basketball courts, greeting children and parents upon entry and departure from the room, offering snacks, and various other forms of interaction with children such as Lego building, crafts, marble maze, etc., providing a safe, happy, and healthy place for children while members make use of the many programs and equipment throughout the facility.

If you need clarification or have any concerns, please contact a Family Activities Coordinator by calling the Shasta Family YMCA at (530) 246-9622.

Can you perform the duties for which you are volunteering? YES NO

If no, please explain _____

I UNDERSTAND THAT ANY MISREPRESENTATION OF THE FACTS ON THIS FORM IS CAUSE FOR DISMISSAL.

Teen Signature

Date

Parent/Guardian Signature

Date

For office use only:

Orientation given by: _____ Date _____

Program _____ Day(s) _____ Time _____ Start Date _____

Notes: _____



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SHASTA FAMILY YMCA TEEN REFERENCE

Dear Teacher, Supervisor or Counselor:

_____ has applied to be a teen volunteer at the Shasta Family YMCA. We are asking for your assistance in evaluating this teen as a potential volunteer to our program. Due to the fact that volunteers work with children, it's important that we have responsible, caring and dependable individuals.

Teen volunteers work with children as young as 6 weeks of age through 12 years old. Volunteers are expected to interact in various aspects with children. Duties include but are not limited to reading, overseeing a craft project or supervising an activity, playing games, and general play. All teens work with an adult during their shift.

Please take just a few moments to rate the applicant on these qualities:

Evaluate Applicant	Excellent	Good	Fair	Poor
Positive Role Model				
Appearance				
Team Player				
Attitude				
Attendance				
Punctuality				
Judgment				
Flexibility				
Initiative				
Competence				

Comments: _____

How long have you known applicant? _____

Signature: _____ Title: _____ Date: _____

Return To:

Shasta Family YMCA 1155 N. Court Street Redding, CA 96001 or Fax 530.246.9645-Attn: FAC Coordinator

For Questions Contact:

Crystal Ruben or Shannon Elrod – Family Activities Coordinators at 530.246.9622