



VOLUNTEER APPLICATION

WASHINGTON UNIVERSITY Campus YMCA
a branch of the YMCA of Greater St. Louis

Please return completed application to:
Campus Y, Attn: Program Director • One Brookings Drive, Campus Box 1076 • St. Louis, MO 63130

Today's Date: _____ Date of Birth: _____

Program (s): (1) _____ (2) _____

Name: _____

Local Address: _____

City: _____ State: _____ Zip Code: _____

Local Phone: _____ Mobile Phone: _____

E-mail: _____ Graduation Year: _____

WU Division: _____ Are you a Program Leader? Yes _____ No _____

Are you a Returning Volunteer? Yes _____ No _____

Emergency Contact Name (Parent/Guardian): _____

Parent/Guardian Phone: _____ Mobile Phone: _____

Home (Permanent Address): _____

City: _____ State: _____ Zip Code: _____

YMCA of Greater St. Louis
Photo/News/Testimonial Release

I grant the YMCA of Greater St. Louis, its agents and the news media the right to photograph me and to use the photographs for news and publicity purposes. I also grant the YMCA, its agents and the news media the right to record my voice or note my comment to use for promotional purposes or on television, newspaper, magazine, or radio news stories. I warrant that the rights granted herein do not conflict with any existing commitments on my part.

_____ Signature of Volunteer _____ Date

United Way Statistical Information

The Campus Y is partially funded by the United Way. We are required to provide statistics on the gender/age/ethnicity/race of our participants. Please complete the following data to assist with those statistics. We do not use this information for any purpose other than statistical.

Age: _____ Gender Identity (Choose all that apply): _____Man _____Woman _____Transgender Other _____

Ethnic/Racial Background (Please check one)

____African American ____Asian ____Caucasian ____Hispanic ____American Indian Other _____

Please turn over à

VOLUNTEER BEHAVIORAL AGREEMENT

CAMPUS Y MISSION

THE CAMPUS Y IS A STUDENT-CENTERED ORGANIZATION DEDICATED TO DEVELOPING ETHICAL LEADERS OF EXEMPLARY CHARACTER BY APPLYING THE PRINCIPLES OF THE YMCA OF GREATER ST. LOUIS, IN PARTNERSHIP WITH WASHINGTON UNIVERSITY IN ST. LOUIS.

CAMPUS Y VISION

WE BELIEVE THE CAMPUS Y OF WASHINGTON UNIVERSITY IN ST. LOUIS WILL BECOME KNOWN AS A PRE-EMINENT STUDENT-CENTERED ORGANIZATION AND WILL GROW IN STATURE AND RESPECT IN THE WASHINGTON UNIVERSITY IN ST. LOUIS COMMUNITY. OUR EFFORTS WILL CONTINUE TO REFLECT THE PRINCIPLES OF ETHICAL AND RESPONSIBLE LEADERSHIP IN EVERYTHING THAT WE DO.

WASHINGTON UNIVERSITY IN ST. LOUIS COMMUNITY PRINCIPLES

- PURSUIT OF KNOWLEDGE
- ACADEMIC INTEGRITY
- RESPECT FOR SELF, PROPERTY, AND OTHERS
- FREEDOM OF EXPRESSION

PLEASE CAREFULLY READ THE FOLLOWING VOLUNTEER EXPECTATIONS. BY SIGNING BELOW, YOU AGREE TO SERVE IN THIS MANNER WHILE YOU VOLUNTEER WITH WASHINGTON UNIVERSITY IN ST. LOUIS CAMPUS Y.

- I WILL BE COURTEOUS AND RESPECTFUL TO OTHER VOLUNTEERS, STAFF, STUDENTS, FACULTY, AND THE COMMUNITY MEMBERS THAT I SERVE.
- I WILL REPRESENT WASHINGTON UNIVERSITY IN ST. LOUIS AND THE CAMPUS Y IN A RESPECTFUL AND ETHICAL MANNER.
- I WILL FOLLOW CAMPUS Y GUIDELINES.
- I WILL FOLLOW AGENCY GUIDELINES, POLICIES AND PROCEDURES.
- I WILL BE ON TIME AND PREPARED TO SERVE THE AGENCY AND COMMUNITY MEMBERS.
- I WILL NOTIFY PROGRAM LEADERS AND AGENCY REPRESENTATIVES IF I AM UNABLE TO VOLUNTEER.
- I WILL COMPLETE ALL PROGRAM REQUIREMENTS.
- I WILL NOT USE ALCOHOL OR DRUGS WHILE PARTICIPATING IN CAMPUS Y PROGRAMS.
- I WILL BE RESPECTFUL OF CAMPUS Y VEHICLES AND FACILITIES.
- I WILL BE FULLY ENGAGED AS A CAMPUS Y PROGRAM PARTICIPANT.

SIGN _____

PRINT NAME _____

DATE _____

PROGRAM (S) _____

