

Downtown Knoxville
420 West Clinch Avenue
Knoxville, TN 37902
P: 865-523-6126
F: 865-637-5263
www.ywcaknox.com

Oak Ridge/Anderson County
1660 Oak Ridge Turnpike
Oak Ridge, TN 37830
P: 865-556-2148

**Phyllis Wheatley
Community Center**
124 South Cruze Street
Knoxville, TN 37915
P: 865-546-0651
F: 865-522-8095

VOLUNTEER APPLICATION

YWCA KNOXVILLE AND THE TENNESSEE VALLEY

Name: _____ Date: _____

Maiden/Other Names Used: _____

Address _____ City _____ State: _____ Zip: _____

E-Mail: _____ Telephone: (Home) _____

Place of Employment: _____

Job Title: _____

Age Range: 15-19 _____ 20-30 _____ 31-40 _____ 41-55 _____ Over 55 _____

Emergency Contact Name: _____ **Phone:** _____

Why do you want to volunteer with the YWCA? _____

How did you hear about us? _____

Desired location: *check all that apply*

- Downtown Knoxville
- Oak Ridge/Anderson County
- Phyllis Wheatley Center

Volunteer interests: *check all that apply*

- | | |
|--|--|
| <input type="checkbox"/> Occasional Volunteer (monthly/bi-monthly) | <input type="checkbox"/> Administrative Support |
| <input type="checkbox"/> Active Volunteer (daily, weekly, bi-weekly) | <input type="checkbox"/> Special Interest Classes |
| <input type="checkbox"/> Youth | <input type="checkbox"/> Fundraising Special Events |
| <input type="checkbox"/> Victim Advocacy | <input type="checkbox"/> Gardening/Center Beautification |
| <input type="checkbox"/> Adult/Youth Education | <input type="checkbox"/> Other: _____ |

Please list three references: *Please do not list any relatives*

1. Name: _____ Phone: _____

Email: _____ Relationship: _____

2. Name: _____ Phone: _____

Email: _____ Relationship: _____

3. Name: _____ Phone: _____

Email: _____ Relationship: _____

State Laws require that we ask the following questions:

Have you ever been convicted of a crime other than a minor traffic offense? Yes _____ No _____

Do we have your permission to check your criminal record? Yes _____ No _____

Has there ever been a “founded” allegations of child abuse against you? Yes _____ No _____

Has there ever been a “founded” allegations of dependent adult abuse against you? Yes _____ No _____

I also give my permission for the YWCA Knoxville and the Tennessee Valley to make a photocopy of two types of my identification, check my background, fingerprint if necessary, and call references. I agree to confidentially amongst clients and the YWCA. I also agree to complete a volunteer timesheet to track my volunteer hours.

Name: _____ Date: _____

Availability (Optional)

If you have a specific time each week you are available to volunteer, check the boxes you are available.

	8 AM	9 AM	10 AM	11 AM	12 PM	1 PM	2 PM	3 PM	4 PM	5 PM	6 PM	7 PM
SUN												
MON												
TUE												
WED												
THU												
FRI												
SAT												
SUN												

You may also let me know any specific information about your availability below:

The YWCA Knoxville and the Tennessee Valley is an Equal Opportunity Employer, and, as such, does not discriminate on the grounds of disability, age, race, color, religion, sex, national origin, or any other classification protected by constitutional or statutory law.

As an Applicant for a Position in the YWCA, You May Help Us Monitor Internal Accountability to Our Affirmative Action Program. *Please Check the Appropriate Space Listed Below:

- | | | |
|---|---|--|
| <input type="checkbox"/> Asian/Pacific Islander/Native American | <input type="checkbox"/> Black/African American | <input type="checkbox"/> White/Caucasian |
| <input type="checkbox"/> Latinx/Hispanic/Chicano | <input type="checkbox"/> Multiracial | <input type="checkbox"/> Other |

*Please Note That This Portion is Strictly Voluntary.

The YWCA Knoxville and the Tennessee Valley thanks you and appreciates any time that you can donate to further our mission.