

PAYROLL AUTHORIZATION FORM

completed by supervisor

YMCA OF WESTERN STARK COUNTY

Employee's Name: _____

EE Email: _____ EE Phone#: _____

Position/Job/Title: _____ Supervisor: _____

Primary Location: _____ Primary Department: _____

NEW HIRE **REHIRE** **CHANGE** **TERMINATION**

RATES

"Department"

- _____ = Admin
- _____ = Housekeeping/ Maintenance
- _____ = Membership Weekend differential?
- _____ = Child Watch Weekend differential?
- _____ = Aquatics Weekend differential?
- _____ = AQ - Swim Instruction
- _____ = Fitness
- _____ = Fit – Healthy Aging
- _____ = Group Exercise
 - Group Exercise (Land)
 - Aquatic Group Exercise
- _____ = Programs
- _____ = Gymnastics
- _____ = Sports
- 18.00 _____ = Rental
- _____ = Preschool
 - Preschool Daycare
 - PS Early Learning
- _____ = School Age- B&A School/SDO
 - School Age CC at YMCA**
 - School Age CC @ Fairless El.
 - School Age CC @Genoa
 - School Age CC @Gorrell
 - School Age CC @Lohr
 - School Age CC @Watson
 - School Age CC @Whittier
- _____ = Day Camp
 - Summer School Age Day Camp

NEW/REHIRE

Date hired ____/____/____

Date to start work ____/____/____

If new position, authorized by whom: _____

CHANGE

Effective date: ____/____/____

Reason for rate change (*attach employee review if applicable*):

Current rate: _____ % or \$: _____

TERMINATION

Last day worked: ____/____/____

Reason for termination: _____

Would you re-hire this individual? Yes No

Form **originated** by: _____ ____/____/____

Form **approved** by: _____ ____/____/____

(Branch Director's Signature)

Read ALL. *Whether you work with children or not, the Y needs for you to be aware of how others are required to act. Staff refers to both YMCA employees and volunteers.*

1. To protect YMCA staff, volunteers, and program members, at **no time** during a YMCA program may a staff person be **alone with a single child where** he or she **cannot be observed by others**. As staff supervise children, they should space themselves in such a way that other staff can see them.
2. Staff shall **never leave a child unsupervised**.
3. **Rest-room supervision:** Staff will **make sure** the rest room is **not occupied by suspicious or unknown individuals** before allowing children to use the facilities. Staff will **stand in the doorway** of the rest room while children are using the rest room. This policy allows privacy for the children and **protection for the staff (not being alone with a child)**. If staff are assisting **younger children, doors to the facility must remain open**. No child, regardless of age, should **ever enter a bathroom alone on a field trip or at other off-site location**. Always send **children in threes** (known as the rule of three), and whenever possible, with staff.
4. Staff should conduct or **supervise private activities in pairs**—diapering, putting on bathing suits, taking showers, and so on. When this is not feasible, staff should be positioned so that they are visible to others.
5. Staff **shall not abuse children** in any way, including
 - physical abuse—striking, spanking, shaking, slapping, and so on;
 - verbal abuse—humiliating, degrading, threatening, and so on;
 - sexual abuse—touching or speaking inappropriately;
 - mental abuse—shaming, withholding kindness, being cruel, and so on;
 - neglect—withholding food, water, or basic care.

No type of abuse will be tolerated and may be cause for immediate dismissal.

6. Staff must **use positive techniques** of guidance, including redirection, positive reinforcement, and encouragement rather than competition, comparison, and criticism. Staff will have **age-appropriate expectations** and set up guidelines and environments that **minimize the need for discipline**. **Physical restraint is used only in predetermined situations** (when necessary to protect the child or other children from harm), administered only in a prescribed manner, and must be documented in writing.
7. Staff will **conduct a health check of each child upon his or her arrival each time** the program meets, noting any fever, bumps, bruises, burns, and so on. Questions or comments will be addressed to the parent or child in a nonthreatening way. Staff will **document any questionable marks or responses**.
8. Staff will **respond to children with respect and consideration** and **treat all children equally**, regardless of sex, race, religion, culture, economic level of the family, or disability.
9. Staff will respect **children's rights not to be touched or looked at in ways that make them feel uncomfortable, and their right to say no**. Other than diapering, children are **not to be touched** on areas of their bodies that would be covered by a bathing suit.
10. Staff will **refrain from intimate displays of affection toward others** in the presence of children, parents, and staff.
11. Staff are **not to transport children** in their own vehicles or allow youth participants old enough to drive to transport younger children in the program.
12. **Staff 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. Possession or use of any type of **weapon or explosive device is prohibited**.
16. Using **YMCA computers** to access pornographic sites, send e-mails with sexual overtones or otherwise inappropriate messages, or develop online relationships is not allowed.
17. **Profanity, inappropriate jokes, sharing intimate details of one's personal life, and any kind of harassment** in the **presence** of children, parents, volunteers, or other staff is **prohibited**.
18. Staff **may not be alone with children they meet in YMCA programs outside the YMCA**. This **includes** babysitting, sleepovers, driving or riding in cars, and inviting children to their homes. Any exceptions require a written explanation before the fact and are subject to prior administrator approval.
19. Staff must be **free of physical and psychological conditions** that might adversely affect children's physical or mental health. If in doubt, an expert should be consulted.
20. Staff will **portray a positive role model** for youth by maintaining an attitude of loyalty, patience, courtesy, tact, and maturity.
21. Staff should **not give excessive gifts to youth** (e.g., TV, video games, jewelry).
22. Staff may **not date program participants who are under the age of 18**.
23. Under **no** circumstances should staff **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).
24. Staff are to **report to a supervisor any other staff or volunteer who violates any of the policies** listed in this Code of Conduct.
25. Staff 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 a supervisor.
26. Staff will act in a **caring, honest, respectful, and responsible** manner consistent with the mission of the YMCA.

Children means anyone under the age of 18 years old.

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

Employee or volunteer signature

Date

Supervisor signature

Date



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FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

**DISCLOSURE AND AUTHORIZATION REGARDING
BACKGROUND INVESTIGATION FOR EMPLOYMENT PURPOSES**

Disclosure

The YMCA of Western Stark County (the "Company") may request from a consumer reporting agency and for employment-related purposes, a "consumer report(s)" (commonly known as "background reports") containing background information about you in connection with your employment, or application for employment, or engagement for services (including independent contractor or volunteer assignments, as applicable).

HireRight, LLC ("HireRight") will prepare or assemble the background reports for the Company. HireRight is located and can be contacted at 3349 Michelson Drive, Suite 150, Irvine, CA 92612, (800) 400-2761, www.hireright.com.

The background report(s) may contain information concerning your character, general reputation, personal characteristics, mode of living, or credit standing. The types of background information that may be obtained include, but are not limited to: criminal history; litigation history; motor vehicle record and accident history; social security number verification; address and alias history; credit history; verification of your education, employment and earnings history; professional licensing, credential and certification checks; drug/alcohol testing results and history; military service; and other information.

Authorization

Full Legal Name

<i>First</i>	<i>Middle</i>	<i>Last</i>	<i>Suffix</i>
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Date of Birth: _____ **Social Security Number:** _____

Phone Number: _____

I hereby authorize Company to obtain the consumer reports described above about me.

Signature _____ **Date** _____

[END OF DOCUMENT]



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**OTHER DISCLOSURES, ACKNOWLEDGMENTS & AUTHORIZATIONS
REGARDING BACKGROUND INVESTIGATION FOR EMPLOYMENT PURPOSES**

Disclosures

Investigative Consumer Report:

YMCA of Western Stark County (the "Company") may request an investigative consumer report about you from HireRight, LLC ("HireRight"), a consumer reporting agency, in connection with your employment, or application for employment, or engagement for services (including independent contractor or volunteer assignments, as applicable). An "investigative consumer report" is a background report that includes information from personal interviews (except in California, where that term includes background reports with or without information obtained from personal interviews), the most common form of which is checking personal or professional references through personal interviews with sources such as your former employers and associates, and other information sources. The investigative consumer report may contain information concerning your character, general reputation, personal characteristics, mode of living, or credit standing. You may request more information about the nature and scope of an investigative consumer report, if any, by contacting the Company.

Ongoing Authorization:

If the Company hires you or contracts for your services, the Company may obtain additional consumer reports and investigative consumer reports about you without asking for your authorization again, throughout your employment or your contract period, as allowed by law.

Summary of Rights under the Fair Credit Reporting Act:

A summary of your rights under the Fair Credit Reporting Act is being provided to you separately.

HireRight Privacy Policy:

Information about HireRight's privacy practices is available at www.hireright.com/Privacy-Policy.aspx.

Acknowledgments & Authorization

I acknowledge that I have received and carefully read and understand the separate "Disclosure and Authorization Regarding Background Investigation for Employment Purposes"; and the separate "Summary of Rights under the Fair Credit Reporting Act" that have been provided to me by the Company.

By my signature below, I authorize the preparation of background reports about me, including background reports that are "investigative consumer reports" by HireRight, and to the furnishing of such background reports to the Company and its designated representatives and agents, for the purpose of



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assisting the Company in making a determination as to my eligibility for employment or engagement for services (including independent contractor or volunteer assignments, as applicable), promotion, retention or for other lawful employment purposes. I understand that if the Company hires me or contracts for my services, my consent will apply, and the Company may, as allowed by law, obtain from HireRight (or from a consumer reporting agency other than HireRight) additional background reports pertaining to me, without asking for my authorization again, throughout my employment or contract period.

I understand that if the Company obtains a credit report about me, then it will only do so where such information is substantially related to the duties and responsibilities of the position in which I am engaged or for which I am being evaluated.

I understand that information contained in my employment (or contractor or volunteer) application, or otherwise disclosed by me before or during my employment (or contract or volunteer assignment), if any, may be used for the purpose of obtaining and evaluating background reports on me. I also understand that nothing herein shall be construed as an offer of employment or contract for services.

I understand that the information included in the background reports may be obtained from private and public record sources, including without limitation and as appropriate: government agencies and courthouses; educational institutions; and employers. Accordingly, I hereby authorize all of the following, to disclose information about me to the consumer reporting agency and its agents: law enforcement and all other federal, state and local government agencies and courts; educational institutions (public or private); testing agencies; information service bureaus; credit bureaus and other consumer reporting agencies; other public and private record/data repositories; motor vehicle records agencies; my employers; the military; and all other individuals and sources with any information about or concerning me. The information that can be disclosed to the consumer reporting agency and its agents includes, but is not limited to, information concerning my: employment and earnings history; education, credit, motor vehicle and accident history; drug/alcohol testing results and history; criminal history; litigation history; military service; professional licenses, credentials and certifications; social security number verification; address and alias history; and other information.

By my signature below, I also promise that the personal information I provide with this form or otherwise in connection with my background investigation is true, accurate and complete, and I understand that dishonesty or material omission may disqualify me from consideration for employment. I agree that a copy of this document in faxed, photocopied or electronic (including electronically signed) form will be valid like the signed original. I further acknowledge that I have received additional state law notices that I have reviewed and read.

Applicant Last Name _____ **First** _____ **Middle** _____

Applicant Signature _____ **Date** _____

Introduce Yourself

_____		Gender: M / F _____	_____	
Name (First, M.I., Last)		Birthdate (mm/dd/yyyy)	Race	
_____		_____	_____	_____
Address		City	State	Zip
_____	_____	_____	_____	
Primary Phone #	Secondary Phone #	Email		
_____	_____	_____		
_____		_____	_____	
Emergency Contact Name		Emergency Phone	Relationship	

YMCA Membership Waiver

By participating in the YMCA Nationwide Membership Program, I agree to **release** the National Council of Young Men's Christian Associations of the United States of America, and its independent and autonomous member associations in the United States and Puerto Rico, from claims of negligence for bodily injury or death in connection with the use of YMCA facilities, and from any **liability** for other claims, including loss of property, to the fullest extent of the law.

I understand the YMCA conducts regular **sex offender screenings** on all members, participants, and guests. If a sex offender match occurs, the YMCA reserves the right to cancel membership, end program participation, and remove visitation access.

The YMCA is committed to providing a safe and welcoming environment for all members, participants and guests participating in our programs and/or using our facilities. To promote safety and comfort for all, individuals are expected to **act appropriately** at all times when they are in our facility, on our property or participating in our programs and to adhere to the values of the YMCA – caring, honesty, respect and responsibility. The YMCA reserves the right to deny access or membership to any person whose behavior does not conform to the **Member Code of Conduct** in the Membership Guide.

I authorize the YMCA of Western Stark County or its designees, agencies and contractors to use without limitation or obligation, **photographs, video** recordings which may include my or my children's image or voice for the purposes of promotion or interpreting YMCA programs.

X _____

SIGNATURE

DATE

(Must be 18 or older to sign, otherwise signature of parent or guardian)

Acknowledgement of Policies & Procedures:

I have reviewed and received a copy of the YMCA's employee handbook. Available to download at www.WestStarkY.org/employee

Date: _____ Initial: _____

Have you ever been employed by this or **any** YMCA before?

NO YES

If yes, when and what YMCA? _____

Current Certifications/Education/Skills/Trainings (please include expiration dates):

Allergies, medications, and medical information that would be needed in case of an emergency:

Doctor's Name and phone # _____
