



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

## **EMPLOYMENT APPLICATION**

### **THANK YOU FOR YOUR INTEREST IN THE YMCA!**

The YMCA is an equal opportunity employer and does not discriminate in recruitment, hiring, or other terms or conditions of employment on the basis of race, color, religion, national origin, sex, disability, age or any other status protected by law. If you would like to apply to join the YMCA team, please complete the application below.

- Be sure to write legibly.
- The application must be completed in full.
- Do not leave any spaces blank or write "see resume" in response to any question.
- Read and sign last page of the application.

### **PERSONAL INFORMATION**

Position Applying For: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Are you 18 years of age or older? (If not, you may be required to provide work authorization) YES NO

### **EMPLOYMENT INFORMATION**

Preferred Job Status: \_\_\_ Full-time \_\_\_ Part-time \_\_\_ Shift-Work

Date Available: \_\_\_\_\_ Are currently employed? YES NO

List available days/hours: Sun \_\_\_\_\_ Mon \_\_\_\_\_ Tue \_\_\_\_\_

Wed \_\_\_\_\_ Thurs \_\_\_\_\_ Fri \_\_\_\_\_ Sat \_\_\_\_\_

Have you previously been employed or volunteered at this Y or any other Y? YES NO

If yes, When/where? \_\_\_\_\_

Do you have any relatives or household members working for this Y? YES NO

If yes, name(s) and relationship: \_\_\_\_\_

**EMPLOYMENT HISTORY** List all previous employment starting with most recent

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Job Title: \_\_\_\_\_

Summarize the nature of work performed and job responsibilities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Immediate Supervisor and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer?    YES            NO

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Job Title: \_\_\_\_\_

Summarize the nature of work performed and job responsibilities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Immediate Supervisor and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer?    YES            NO

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Job Title: \_\_\_\_\_

Summarize the nature of work performed and job responsibilities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Immediate Supervisor and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer?    YES            NO

# EDUCATION AND TRAINING

## Educational Background

School	City, State	Diploma Awarded	Degree	Major
High School				
GED				
College				
Graduate School				
Vocational/other				

Describe any non-employment such as school or volunteer activities that might strengthen your application: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Safety & Job Specific Certifications

Type (CPR, First Aid, CDA, etc.)	Provider	Level	Expiration

## PERSONAL REFERENCES

Do not list relatives or past employers

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address/City \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address/City \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address/City \_\_\_\_\_

**Notice to all applicants: The YMCA enforces its policies and practices to prevent child abuse.** Allegations or suspicions of child abuse are taken very seriously at the YMCA and will be reported to the proper authorities for investigation. We have abuse reporting procedures, there are unscheduled visits from supervisors, we have an open door for parents, and we have a code of conduct for staff. We minimize opportunities for abuse to occur at our Y. We also screen carefully to prevent abusers from being hired and we provide child abuse prevention training to all staff.

## **APPLICATION ACKNOWLEDGEMENT AND AUTHORIZATION**

**Please read all statement and sign below:**

I authorize both the YMCA and persons listed (references, schools, current, unless noted, and former employers and any others with whom you desire to check) to communicate with regard to any relevant information that may be required to reach and employment decision. I agree to hold such persons harmless with respect to any information they may supply. I understand and agree that any offer of employment is contingent upon successful completion of all background check processes, which may include fingerprinting and a criminal history background check.

I certify that all information provided by me in this application is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in this application or any other document submitted in connection with YMCA employment will result in denial of employment or termination of employment regardless of the timing or circumstances of discovery.

If I am employed by the YMCA I understand my employment can be terminated, with or without cause and with or without notice, at any time at the option of the YMCA or myself. I understand that, other than the Executive Director of the YMCA, no manager, supervisor or representative of the YMCA has authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing. Only the Executive Director of the YMCA has the authority to make any agreement contrary to the foregoing and then only in writing. I further expressly agree that, with respect to the at-will employment relationship, this constitutes the full, complete and final expression of the parties' intent concerning the nature of any employment relationship between myself and the YMCA.

I understand that all offers of employment are conditional upon my ability to provide appropriate documents regarding my identity and legal right to work in the United States. I understand that this application is only valid for the position applied for at present and that the YMCA is not obligated to retain or consider this application for future openings. If hired, I agree to abide by YMCA policies and rules at all times. I acknowledge that I have read the above statements and understand them.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_