

Employment Application

STRENGTHENING THE FOUNDATION OF OUR COMMUNITY 8/1/19

Thank you for your interest in the Canton Family YMCA

The YMCA is an equal opportunity employer. We do not discriminate in the recruitment, hiring or conditions of or employment based on race, color, religion, national origin, citizenship status, sex, marital status, disability, age or veteran status or any other status protected by law.

If you would like to join our 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.
- *The YMCA has a zero-tolerance policy for child abuse & neglect and we will report*
- Read and sign the last page of the application; if you are 18 years or older.

Personal Information	
A criminal background check is required and may be ordered in accordance with a third party, to any applicant whom a conditional offer of employment is made.	
Position applying for:	
Date of application: Date Available:	
Job(s)	
Name:	
Address:	-
City/State/Zip:	_
Home Phone:	
Cell/Business Phone:	
Email Address:	
Are you 18 of age or older? (if not you may be required to provide authorization to work) If hired, can you provide verification of your legal right to work in the United States? Can you perform the essential functions of the job for which you are applying, with or without reasonable accommodation?	
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 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 screen carefully to prevent abusers from being hired and we require child abuse prevention training for staff.	he

Employme	nt Informatio	on							
List available days and hours:									
Sunday	Monday	Tuesday	Wednesday	Thursday	Frida	y Saturday			
-	,	•	-	-					
	- u [Doubling.			. 🗆				
Preferred Job St	atus: Full time [Part time	Seasonal	As needed	, □				
	ying for seasonal w	•	available during th	ie school year?		Yes No			
,	o work a split shift					Yes No			
	usly been employed					Yes L No			
If yes, when and	at which location(s	s)?							
Do you have any	relatives currently	working for the	Canton Family YM	CA?					
Or any other YM						Yes No			
If yes, Name(s) a	nd Relationship								
How did you hea	r about the Canton	Family YMCA		YMCA Staff Ref	erral 🔲 Y	MCA Member			
				Advertisement	S	chool			
Name of referral	source:			YMCA Website	□ v	Valk-in			
						Other			
Education	and Training								
Educational Ba	ckground may be	required for ce	ertain positions.	(Will not autom	atically disc	qualify you)			
	Name of Scho	ol City, St		Awarded	Degree	Major			
High School			Yes						
GED			No	ogress					
				ogress					
College			Yes No						
College				ogress					
Graduate			Yes	9.022					
School			No						
5011001				ogress					
Vocational/			Yes	3					
Other			No						
			_In Pr	ogress					
	s do you speak a					<u> </u>			
	on-employment e	xperience such	as school or vol	unteer activities	that might	t strengthen your			
application.									
Safety and Job Specific Certifications									
	•	Provid	ler	Level	F	xpiration			
Type (CPR, First Aid, CDA, etc.) Provider			.C1	20001		лришин			

Personal References	Do not list relatives or past employers.				
Name:	Position:		_Years Known:		
Address:	City:	State:	Zip:		
Phone #: _()	Alternate #:(.)			
Name:	Position:		_Years Known:		
Address:	City:	State:	Zip:		
Phone #: _()	Alternate #:(.)			
Name:	Position:		_Years Known:		
Address:	City:	State:	Zip:		
Phone #: _()	Alternate #: _(
Application Acknowledgement and A	Authorization				
Please read all statements and sign below: I authorize both the Canton Family YMCA and persemployers and any others with whom you desire to be required to reach an employment decision. I ago they may supply.	o check) to communicate	with regard to any	relevant information that may		
I authorize the Canton Family YMCA to investigate position. I understand that the YMCA will utilize a that I have the right to withhold permission and in	an outside firm to assist i	n reviewing the info	ormation. I also understand		
I understand this position requires a thorough bac sex offender registry check. I understand that if I	-		•		
I understand that submission of an application do application or in the interview process is intended if hired as a result of this employment application Company's option or my option, and that employment be changed with or without cause, with or without promotion, transfer, compensation, benefits, dutie Company during my employment. If employed, I again.	to create a contract bety, my employment may be tent with the Company is thout notice, including bues, and location of work.	ween the Company discontinued with c considered "at will. t not limited to ter This constitutes my	and myself. I understand that or without cause at either the "I agree that my employment mination, demotion, y entire agreement with the		
I understand that all offers of employment are conidentity and legal right to work in the United State		to provide appropri	ate documents regarding my		
I acknowledge that I have read the above stateme this application is correct, accurate and complete misrepresentation, or omission of any facts in said cause for denial of employment or termination of	to the best of my knowle d document (and any othe	dge. I understand t er document submit	that the falsification, ted such as a resume) will be		
Signature:		Date:			

	dditional sheets if nee		
Employer	Telephone	<u>Dates Employed</u>	Summarize the nature of the work performed and job responsibilities.
- r · /		From:	
Address			
Job Title		То:	
Immediate Supervisor/Title			
Reason for Leaving			
May we contact this employer?	☐ Yes ☐ No		
Employer	Telephone	<u>Dates Employed</u>	Summarize the nature of the work performed and job responsibilities.
Address		From:	
Job Title		To:	
Immediate Supervisor/Title			
Reason for Leaving			
May we contact this employer?	☐ Yes ☐ No		
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Job Title		To:	
Immediate Supervisor/Title			
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Employer	Telephone	<u>Dates Employed</u> From:	Summarize the nature of the work performed and job responsibilities.
Address			
Job Title		- To:	
Immediate Supervisor/Title			
Reason for Leaving			
May we contact this employer?	☐ Yes ☐ No		
Please explain any gaps in your employ	ment history.		
What other business experience, persor	nal experience or traini	ng have you had that may	/ have prepared you for this position?