Date of 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 join the YMCA staff team, please complete the application below.

- Be sure to write legibly.
- The application must be completed in full.
- Read and sign the last page of the application.

Personal Information

PLEASE PRINT:

Name: _____ Social Security Number: _____

Address: _____ Home Phone: _____

City: _____ Cell Phone: _____

State: _____ Zip: _____ Email Address: _____

Other Names Used: _____

Employment Information

Position Applying For: _____

Date Available: _____ Desired Pay: _____

Available Days/Hours:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

How did you hear about this opening? Name of referral source: _____

- ☐ YMCA staff referral
- ☐ YMCA Member
- ☐ School
- ☐ Advertisement
- ☐ Walk-in
- ☐ Other:_____
- ☐ YMCA Website

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 also screen carefully to prevent abusers from being hired and we provide child abuse prevention training to staff.

Employment Information (Continued)

Can you, after employment, submit verification on your legal right to work in the United States? ☐ Yes ☐ No

Are you over the age of 18? ☐ Yes ☐ No

Have you ever served in the military? ☐ Yes ☐ No If yes, which branch? _____

Have you ever been convicted of a crime, pled no contest, or had adjudication withheld? If yes, please provide a date, location, charges, and a complete explanation of all offenses. *(A conviction will not necessarily bar employment. The YMCA may consider the nature, date, and circumstance of the offenses.)* ☐ Yes ☐ No

Have you ever been employed or volunteered at this Y or any other YMCA? ☐ Yes ☐ No

Do you have any relatives or household members currently working for this YMCA? ☐ Yes ☐ No

If yes, name(s) and relationship: _____

Have you ever been disciplined, discharged, or asked to resign from a prior position? ☐ Yes ☐ No
Explain the circumstances on a separate sheet and attach it to this application

Have you ever been charged with or investigated for sexual abuse of another person? ☐ Yes ☐ No

If you have answered YES to any one of the previous questions, please explain, in detail on a separate attached paper, information including the date of the court action, the offense in questions, and the address of the court involved. *NOTE: Conviction of a crime is not an automatic bar to employment by the YMCA.*

Education and Training

	Name of	City, State	Diploma Awarded	Degree	Major	Years Attended
☐ High School ☐ GED						
College						
Graduate School						
Vocational/ Other						

Describe any non-employment experience such as school or volunteer activities, trainings, seminars, or professional certifications that might strengthen your application:

_____

_____

_____

_____

Safety and Job Specific Certifications

Type CPR, First Aid, CDA, Etc.	Provider	Level	Expiration

Employment Data

Dates of Employment (Start with most Recent)	Company Name & Address (City, State, Zip)	Immediate Supervisor Name & Phone Number	Position Held	Reason for Leaving	Brief Summary of Job Responsibilities
Started ___/___/___ Ended ___/___/___ May we contact this employer? Yes No					
Started ___/___/___ Ended ___/___/___ May we contact this employer? Yes No					
Started ___/___/___ Ended ___/___/___ May we contact this employer? Yes No					
Started ___/___/___ Ended ___/___/___ May we contact this					

Reference Data

Please provide four references that we may contact. Of the references provided, two must be professional, one personal, and one family. Those references listed must have given their consent to provide a reference for you.

Professional		
Name: _____	Relationship:_____	Years Known: _____
Address: _____	City: _____ State: _____	Zip: _____
E-Mail: _____	Phone: _____	Alternate #: _____
Professional		
Name: _____	Relationship:_____	Years Known: _____
Address: _____	City: _____ State: _____	Zip: _____
E-Mail: _____	Phone: _____	Alternate #: _____
Personal		
Name: _____	Relationship:_____	Years Known: _____
Address: _____	City: _____ State: _____	Zip: _____
E-Mail: _____	Phone: _____	Alternate #: _____
Family		
Name: _____	Relationship:_____	Years Known: _____
Address: _____	City: _____ State: _____	Zip: _____
E-Mail: _____	Phone: _____	Alternate #: _____

Application Acknowledgement and Authorization

- 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 an employment decision. I understand and agree that any offer of employment is contingent upon successful completion of all background check processes, including a criminal history background check.
- 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 form is intended for use in evaluating my qualifications for employment and that this application is not an offer of employment. I further understand that if hired, my employment will be considered "at will" and that my employment may be terminated for any reason, with or without cause or notice at any time by me or the YMCA and that this application is not intended to constitute a contract or continued employment.
- If employed by the YMCA I will abide by all policies and rules at all times.
- I understand that I will be required to possess a current and valid drivers license if my position requires me to drive in the course of my work.
- 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 in connection with YMCA employment will result in denial of employment or termination of employment regardless of the timing or circumstances of discovery. You are hereby authorized to make any investigation of my personal history, academic/professional credentials, military service records, criminal, driving, financial, and credit record through any investigative or credit bureaus of your choice.* *Section 604 "(b) of FCRA Provides Conditions for Furnishing and Using consumer Reports for Employment Purposes.*
- I acknowledge that I have read the above statements and understand them.

Signature:_____ Date:_____