



## Employment Information

What type of position are you applying for? Department: \_\_\_\_\_

Full time (35-40 hours per week, 12 months)       Part Time       Seasonal (FT or PT, less than 3 months)

Available start date? \_\_\_\_\_ Any restrictions to work hours? \_\_\_\_\_

List available days / hours below:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Have you previously been employed by this YMCA or any other YMCA?  Yes  No

If yes, when and at which locations? \_\_\_\_\_

Have you previously volunteered at this YMCA or any other YMCA?  Yes  No

If yes, when and at which locations? \_\_\_\_\_

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

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

How did you find us?  YMCA Staff Referral  Website  YMCA Member  Walk-In  Advertisement  Other

Name of referral source (if applicable): \_\_\_\_\_

## Education & Training

### Educational Background

	Name of School	City, State	Diploma Awarded	Degree	Major
<input type="checkbox"/> High School <input type="checkbox"/> GED			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress		
College			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress		
Graduate School			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress		
Vocational/ Other			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress		

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


### Safety & Job Specific Certifications

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

## Employment History

Provide the following information of your past and current employers or assignments, starting with the most recent. (Use additional sheets if necessary.)

Employer	Telephone ( )	<u>Dates Employed</u> From: ___/___	Summarize the nature of the work performed and job responsibilities.
Address		To: ___/___	
Starting Job Title / Final Job Title		<u>Starting</u> Hourly Rate/Salary	
Immediate Supervisor and Title		\$ _____ per _____	
Reason for Leaving		<u>Ending</u> Hourly Rate/Salary	
May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$ _____ per _____	

Employer	Telephone ( )	<u>Dates Employed</u> From: ___/___	Summarize the nature of the work performed and job responsibilities.
Address		To: ___/___	
Starting Job Title / Final Job Title		<u>Starting</u> Hourly Rate/Salary	
Immediate Supervisor and Title		\$ _____ per _____	
Reason for Leaving		<u>Ending</u> Hourly Rate/Salary	
May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$ _____ per _____	

Employer	Telephone ( )	<u>Dates Employed</u> From: ___/___	Summarize the nature of the work performed and job responsibilities.
Address		To: ___/___	
Starting Job Title / Final Job Title		<u>Starting</u> Hourly Rate/Salary	
Immediate Supervisor and Title		\$ _____ per _____	
Reason for Leaving		<u>Ending</u> Hourly Rate/Salary	
May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$ _____ per _____	

Employer	Telephone ( )	<u>Dates Employed</u> From: ___/___	Summarize the nature of the work performed and job responsibilities.
Address		To: ___/___	
Immediate Supervisor and Title			
Reason for Leaving		<u>Ending</u> Hourly Rate/Salary	
May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$ _____ per _____	

Please explain any gaps in your employment history.

What other business experience, personal experience or training have you had that may have prepared you for this position?

**References** List at least three character references/persons that know you well and can attest to your abilities and suitability for YMCA employment (*one reference must be a family member*).

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_ / \_\_\_\_\_ Alternate #: \_\_\_\_\_ / \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Years Known: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_ / \_\_\_\_\_ Alternate #: \_\_\_\_\_ / \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Years Known: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_ / \_\_\_\_\_ Alternate #: \_\_\_\_\_ / \_\_\_\_\_

**Application Acknowledgement and Authorization**

I certify that all information I have provided in order to apply for and secure work with the MetroWest YMCA is true, complete and correct, and I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the MetroWest YMCA's service, whenever it is discovered.

Initial \_\_\_\_\_

I expressly authorize, without reservation, the MetroWest YMCA, its representatives, employees or agents to contact and obtain information from all references (personal and professional) employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resumé or job interview. I hereby waive any and all rights and claims I may have regarding the YMCA, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations, organizations for furnishing such information about me. I am aware that I have the right to make a written request for disclosure of the nature and scope of any report that may be ordered.

Initial \_\_\_\_\_

I understand upon offer of employment, the YMCA will conduct a criminal background check prior to and during my employment as well as a child abuse registry check and I am subject to random, accident follow-up, and for cause drug testing, as well as post offer drug screening contingent on employment.

Initial \_\_\_\_\_

I am not a child molester, abuser or pedophile; and have not been accused of being a molester or abuser.

Initial \_\_\_\_\_

I understand that the YMCA does not discriminate in hiring or employment on the basis of race, veteran's status, religious creed, national origin, sexual orientation, ancestry or age; or on the basis of a handicap not limiting the applicant's ability to perform satisfactorily the job available. The YMCA will give this application every reasonable consideration. However, in accepting it, the YMCA makes no commitment of employment to the applicant.

Initial \_\_\_\_\_

I understand that this application remains current for only 60 days. At the conclusion of that time, if I have not heard from the YMCA and still wish to be considered for employment, it may be necessary to reapply and fill out a new application. **Employment with the YMCA is employment at will** which means that employees may end their employment at any time, for any reason; and that the employer (the YMCA) may terminate employees at any time for any reason, with or without cause.

Initial \_\_\_\_\_

I understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard, and

**I certify that I have read, fully understand and accept all terms of the foregoing applicant statement.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

