

# FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

## TWIN PIKE FAMILY YMCA 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 staff 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 the last page of the application.

Personal Information					
Position Applying For: Date:					
Preferred YMCA Location:		Date Available:			
NAME:			E-mail:		
Last Address:	First	MI			
Street Ci	ty		State	ZIP	
Telephone: Home/	Business _	/	Mobile/	<u></u>	
Are you 18 years of age or old	er? (If not, you may be	e required to prov	ide work authorization.)		Yes
					No
If hired, can you provide verific	cation of your legal rigl	ht to work in the l	Jnited States?		Yes
					No
Can you perform the essential functions of the job for which you are applying, with or without reasonable accommodation?				Yes	
accommodations					No
Have you ever been convicted date, location, charges and a c					
The YMCA may consider the na				my bar employment.	Yes
					No

#### 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 and we talk with children about personal safety and touching limits. We also screen carefully to prevent abusers from being hired and we provide child abuse prevention training to staff.

E	Employment Information						
Į	List available days/	hours:					
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Pr	Preferred Job Status: Full-time Part-time Seasonal As Needed						
Ha	Have you previously been employed by this YMCA or any other YMCA?  Yes  No						No
]	If yes, when? At which locations?						
Ha	Have you previously volunteered at this YMCA or any other YMCA?  Yes  No						No
]	If yes, when? At which locations?						
Do	Do you have any relatives or household members currently working for this YMCA?  Yes  No				No		
	If yes, name(s) and relationship:						
	How did you hear about this opening?  Name of referral source:  School		Advertis	YMCA member Advertisement			
	Walk-in					Other	
	YMCA website						

### **Education & Training Educational Background** Name of School Diploma Awarded City, State Degree Major High School Yes **GED** No In Progress Yes College No In Progress Graduate Yes School No In Progress Vocational/ Yes Other No 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, CDA, etc.) Provider Level Expiration

				even years starting with the
Employment History most	recent. Use addition	onai		Summarize the nature of the work
Employer	Telephone /		<u>Dates Employed</u> From:/	performed and job responsibilities.
			- ,	
Address			To:/	
			Starting Hourly	
Job Title		-	Rate/Salary	
		\$_	per	
Immediate Supervisor and Title		-	Fadina Haushy	
			<u>Ending</u> Hourly Rate/Salary	
Reason for Leaving		-		
May we contact this employer?	Yes No	\$_	per	Summarize the nature of the work
Employer	Telephone /		<u>Dates Employed</u> From: /	performed and job responsibilities.
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Address			To:/	
		†	Starting Hourly	
Job Title			Rate/Salary	
		\$_	per	
Immediate Supervisor and Title		-	Ending Hourly	
			Rate/Salary	
Reason for Leaving	V No	- t	nor	
May we contact this employer?	Yes No Telephone	<b>→</b> _	per Dates Employed	Summarize the nature of the work
Employer	/		From:/	performed and job responsibilities.
,	•		To: /	
Address			To:/	
Job Title			Starting Hourly	
Job Title		-	Rate/Salary	
		\$_	per	
Immediate Supervisor and Title		+	Ending Hourly	
			Rate/Salary	
Reason for Leaving	Van Na		nor	
May we contact this employer?	Yes No Telephone	<b>-</b> * _	per Dates Employed	Summarize the nature of the work
Employer	/		From:/	performed and job responsibilities.
			To: /	
Address		<u> </u>		
Job Title			<u>Starting</u> Hourly Rate/Salary	
		_		
Immediate Supervisor and Title		\$_	per	
		1	Ending Hourly	
Reason for Leaving			Rate/Salary	
		\$	per	
, , , , , , , , , , , , , , , , , , , ,	Yes No	<u> </u>	·	
Please explain any gaps in your employ	ment history.			
What other business experience, persor	nal experience or traini	ing ha	ave you had that may	have prepared you for this position?
				, ,

Professional References		Do not list relatives.			
Name:	Occupation:	Years Known:			
Address:		State: Zip:			
E-mail:	Phone:	Alternate #:/			
Name:	Occupation:	Years Known:			
Address:	City:	State: Zip:			
E-mail:	Phone:	Alternate #:/			
Name:	Occupation:	Years Known:			
Address:	City:	State: Zip:			
E-mail:	Phone:	Alternate# :/			
information that may be required to reach an 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, including 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 CEO 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 CEO 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:			

FOR EMPLOYMENT DEPARTMENT USE ONLY				
Interviewer's Signature	 			
c. viewer 3 signature	Succ			