

APPLICATION FOR EMPLOYMENT Altavista Area YMCA Discovery Place (Child Care) 1000 Franklin Ave., Altavista, VA. 24517

Today's Date
Applicant's Name
Address (include zip code)
 E-mail
Cell# Other#
Employment Seeking:Part-timeFull-timeSummer Day Camp
Infants (Altavista only)Toddlers (Altavista only)Pre-School (Altavista only)School-Age
Which Site Do You Prefer? (Rate 1-7)
Altavista YMCALeesville Rd. Elem. (Lynchburg)Tomahawk Elem. (Lynchburg)
Concord ElemGretna ElemRustburg ElemYellow Branch Elem.
Are you 18 years or older?YesNo When would you be available to start?
Why would you like to have this position?
What do you feel most qualifies you for this position?

List your special skills and interests that program		
Would you be willing to continue your programs/workshops that may be reco	education by enrolling in certain college commended?YesNo	courses or other training
List all courses w/dates that you have Development.	taken that were related to Early Childhoo	d Education, Human Relationships, Child
List any certificates, awards or publish materials Describe how you would handle a chile class	d that was disruptive in your	
Name of School/College	EDUCATION Did you graduate	College Degree
Name of School/Conege		

Do you have any known medical condition, such as back injury, knee injury, etc.?

__Yes __No If Yes, please explain_____

Have you ever received Workman's Compensation or Disability Insurance?

Yes	No	If Yes, please
explain		

Have you ever been convicted of a felony, barrier crime or subject of a founded Child Protective Service complaint?

___Yes ___No If yes explain______

		Beginning with pre		
Name/Address/Phone Number	Dates	Rate of Pay	Duties	Reason for Leaving

REFERENCES:

2 or 3 previous employers, teacher, pastor

ist name, address, e-mail, and <u>day-time</u> phone r.	lumber	
L		
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Your brief

Biography:_____

I understand that if I am hired, I will be on a 90-day probationary period. I understand that Criminal Background Clearances are required for this job.

Signature

Date

Application Acknowledgement and Authorization

Please read all statements 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 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. 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:

ADMINISTRATIVE USE ONLY			
Date of Interview	Interviewers Initials	-	
AcceptedRejected			
Reason			
Program/Position			
Date of Orientation	_		
Date Terminated	-		
Reason			