

FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

ALTAVISTA AREA YMCA EMPLOYMENT APPLICATION

Thank you for your interest in the YMCA! This position supports the work of the Y, a leading nonprofit, charitable organization committed to strengthening community through youth development, healthy living and social responsibility. 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: First Last MT Address: City State /______Business /______Mobile ZIP Street Telephone: Home Are you 18 years of age or older? (If not, you may be required to provide work authorization.) Yes No If hired, can you provide verification of your legal right to work in the United States? Yes No Can you perform the essential functions of the job for which you are applying, with or without reasonable Yes accommodation? 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.

Note to Ys: Modify above statement as necessary to fit your practices.

Employment Application

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

Education & Training

Educational Background					
	Name of School	City, State	Diploma Awarded	Degree	Major
High SchoolGED			YesNoIn Progress		
College			YesNoIn Progress		
Graduate School			YesNoIn Progress		
Vocational/ Other			 Yes 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	

The Y: We're for youth development, healthy living, and social responsibility.

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Employment History rece	ent. Use additional sh	Dates Employed	Summarize the nature of the work	
Employer	Telephone	From:/	performed and job responsibilities.	
			performed and job responsibilities.	
Address		To:/		
Job Title	ļ			
Immediate Supervisor and Title				
Reason for Leaving				
-	Yes 🗆 No			
	Telephone	Dates Employed	Summarize the nature of the work	
Employer	/	From:/	performed and job responsibilities.	
	· · ·			
Address		To:/		
Job Title				
Immediate Supervisor and Title				
- <i>x</i>				
Reason for Leaving				
May we contact this employer?	Yes No			
	Telephone	Dates Employed	Summarize the nature of the work	
Employer	/	From:/	performed and job responsibilities.	
	ļ	To: /		
Address	ļ			
Job Title				
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Immediate Supervisor and Title				
Reason for Leaving	ļ			
May we contact this employer?	🗆 Yes 🗆 No			
	Telephone	Dates Employed	Summarize the nature of the work	
Employer	. /	From:/	performed and job responsibilities.	
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Address		To:/		
Job Title				
Immediate Supervisor and Title				
Immediate Supervisor and Title				
Reason for Leaving				
May we contact this employer? Ves No				
What other business experience, personal experience or training have you had that may have prepared you for this position?				
What other business experience, pers	Indiexperience of training	Ig have you had that may		

Personal Re	ferences		Do not list relatives or past employers.
Name:		Occupation:	Years Known:
Address:		City:	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#: //

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 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:

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