



J. Smith Young YMCA Application for Employment

YMCA Mission: To put Christian principles into practice through programs that build healthy mind, spirit, and body for all.

PLEASE READ BEFORE COMPLETING THIS APPLICATION

The J. Smith Young YMCA does not discriminate in the recruitment, hiring, and conditions of employment on the basis of race, color, religion, national origin, sex, marital status, disability, age or veteran status. No question on this application is intended to secure information to be used in a discriminatory manner. Your completed application will be reviewed carefully, but its receipt does not imply that you will be employed. Employment consideration necessitates that you meet all minimum qualifications required for the position for which you are applying. This YMCA is committed to the goal of operating a drug-free work environment. Consistent with this goal, we have implemented a comprehensive Substance Abuse Policy which contains provisions for testing for the use of controlled substances. **ANY JOB APPLICANT CONSIDERED "OTHERWISE QUALIFIED" FOR EMPLOYMENT WILL BE REQUIRED TO UNDERGO A PRE-EMPLOYMENT DRUG TEST DESIGNED TO TEST FOR THE USE OF CONTROLLED SUBSTANCES. IN ADDITION, A CRIMINAL RECORD CHECK MAY BE CONDUCTED ON ALL APPLICANTS. AND WHERE APPLICABLE, A DEPARTMENT OF MOTOR VEHICLE RECORD CHECK.**

ANSWER ALL QUESTIONS COMPLETELY AND PLEASE PRINT (in ink)

PERSONAL DATA

Name: _____
Last First Middle

Address: _____
Street

City State Zip How long? _____

Phone: _____ **Email:** _____

GENERAL INFORMATION

Please check the position(s) that interest you:

Summer Camp Counselor After School Counselor Front Desk
 Lifeguard Swim Instructor Child Watch (nursery)
 Fitness Instructor Fitness Trainer
 Other (please specify) _____

Are you age 18 or older? Yes No **Are you a U.S. citizen?** Yes No

Have you ever been convicted of a crime other than a minor traffic violation? (A conviction will not necessarily bar employment.

The YMCA may consider the nature, date, and circumstances as to whether the offense is relevant to the duties of the position

applied for.) Yes No If yes, please explain and list dates: _____

Date available: _____ **Salary desired:** _____

Type of employment desired: Full time Part time Summer

If you are a student, please list the periods/dates that you are available to work during the next 12 months:

_____ thru _____ _____ thru _____ _____ thru _____

Please circle days / indicate hours you are available to work: M T W Th F S Su From: _____ to _____

Have you ever been employed with the YMCA before? Yes No

If yes, where and when? _____

EDUCATION AND/OR TRAINING					
	Name of School	Location	Major	Graduated?	Dates attended
High School					
College					
Graduate School					
Vocational					

Describe any volunteer work, other experience, interest, training, or honors received which you consider relevant to the job(s) you are applying for:

Provide copies and list all current special licenses, permits, certifications and level and credited hours. (CPR, lifeguard, first aid, etc.)

Type _____ Level _____ Expiration date _____

List any computer skills:

EMPLOYMENT HISTORY List all previous employers beginning with current or last employment. DO NOT write "See resume". Use additional paper if necessary.

Employer: _____ Phone #: _____

Address: _____ Dates employed: _____

Position(s) held: _____

Description of duties: _____

Salary: _____ Supervisor's name: _____

What did you like best about this job? _____

What did you like least about this job? _____

Reason for leaving: _____ May we contact employer? ____ Yes ____ No

EMPLOYMENT HISTORY List all previous employers beginning with current or last employment. DO NOT write "See resume". Use additional paper if necessary.

Employer: _____ Phone #: _____

Address: _____ Dates employed: _____

Position(s) held: _____

Description of duties: _____

Salary: _____ Supervisor's name: _____

What did you like best about this job? _____

What did you like least about this job? _____

Reason for leaving: _____ May we contact employer? ____ Yes ____ No

EMPLOYMENT HISTORY List all previous employers beginning with current or last employment. DO NOT write "See resume". Use additional paper if necessary.

Employer: _____ Phone #: _____
Address: _____ Dates employed: _____
Position(s) held: _____
Description of duties: _____

Salary: _____ Supervisor's name: _____
What did you like best about this job? _____
What did you like least about this job? _____
Reason for leaving: _____ May we contact employer? ____ Yes ____ No

EMPLOYMENT HISTORY List all previous employers beginning with current or last employment. DO NOT write "See resume". Use additional paper if necessary.

Employer: _____ Phone #: _____
Address: _____ Dates employed: _____
Position(s) held: _____
Description of duties: _____

Salary: _____ Supervisor's name: _____
What did you like best about this job? _____
What did you like least about this job? _____
Reason for leaving: _____ May we contact employer? ____ Yes ____ No

PLEASE READ CAREFULLY BEFORE SIGNING

I hereby certify that the information on this application is accurate to the best of my knowledge and is subject to verification by the YMCA. I authorize the persons, schools, previous employers, agencies and other organizations named in this application to provide the YMCA (its authorized employees or representatives) with relevant information that may be required to arrive at an employment decision and I hereby release any such persons, schools, previous employers, agencies and organizations from any and all liability which they might otherwise incur as a result. I understand and consent to an inquiry that may include information as to my character, general reputation, and personal characteristics, whichever may be applicable. I understand that any misrepresentation or omission of a material fact on my application in connection with employment will be grounds for refusal of employment or for immediate termination regardless of when such information is discovered.

I understand that the YMCA is a drug and alcohol free workplace and hereby give my consent to the YMCA and any laboratory or health care provider designated by the YMCA, to collect and test urine samples from me at any time during my employment, to indicate the presence of drugs or alcohol. In the event that I am employed, I understand that all employees of the YMCA are subject to termination at any time without prior notice and without cause at the discretion of the YMCA.

Please sign below to indicate that you have read and understand the above statements and accept the same as a condition of your employment with the J. Smith Young YMCA.

Signature of applicant: _____ **Date:** _____

PERSONAL REFERENCE

The person named below is applying for employment with the J. Smith Young YMCA. Your confidential answers to the following questions will help us better evaluate the applicant. Please complete this page and mail it to the YMCA at 119 W. Third Ave., Lexington, NC, 27292.

NAME OF APPLICANT: _____

JOB(S) THEY ARE APPLYING FOR: _____

Qualities	Excellent	Very Good	Good	Fair	Poor	Not Known
Character						
General Attitude & Personality						
Ability to get along with others						
Communication skills						
Trustworthiness / Dependability						
Honesty						
Willingness to take initiative						
Leadership						
Observance of rules & regulations						
Acceptance of supervision						
Behavior / Emotional stability						
Personal habits / Grooming						
Safety habits						
Common sense / Judgment						
Ability to work with children						

1. How long have you known the applicant? _____

2. What is your relationship to the applicant? _____

3. Do you know of any reason the applicant should not work in a setting with children? ___ Yes ___ No

If yes, why? _____

4. If you are a previous employer, would you rehire this person? _____ If no, why? _____

5. What do you feel are this person's major strengths and weaknesses? Please be specific.

6. Would you let the applicant babysit your own child(ren)? ___ Yes ___ No

Name of reference (please print): _____ Date: _____

Signature: _____ Phone: _____

PERSONAL REFERENCE

The person named below is applying for employment with the J. Smith Young YMCA. Your confidential answers to the following questions will help us better evaluate the applicant. Please complete this page and mail it to the YMCA at 119 W. Third Ave., Lexington, NC, 27292.

NAME OF APPLICANT: _____

JOB(S) THEY ARE APPLYING FOR: _____

Qualities	Excellent	Very Good	Good	Fair	Poor	Not Known
Character						
General Attitude & Personality						
Ability to get along with others						
Communication skills						
Trustworthiness / Dependability						
Honesty						
Willingness to take initiative						
Leadership						
Observance of rules & regulations						
Acceptance of supervision						
Behavior / Emotional stability						
Personal habits / Grooming						
Safety habits						
Common sense / Judgment						
Ability to work with children						

1. How long have you known the applicant? _____

2. What is your relationship to the applicant? _____

3. Do you know of any reason the applicant should not work in a setting with children? ___ Yes ___ No

If yes, why? _____

4. If you are a previous employer, would you rehire this person? _____ If no, why? _____

5. What do you feel are this person's major strengths and weaknesses? Please be specific.

6. Would you let the applicant babysit your own child(ren)? ___ Yes ___ No

Name of reference (please print): _____ Date: _____

Signature: _____ Phone: _____

PERSONAL REFERENCE

The person named below is applying for employment with the J. Smith Young YMCA. Your confidential answers to the following questions will help us better evaluate the applicant. Please complete this page and mail it to the YMCA at 119 W. Third Ave., Lexington, NC, 27292.

NAME OF APPLICANT: _____

JOB(S) THEY ARE APPLYING FOR: _____

Qualities	Excellent	Very Good	Good	Fair	Poor	Not Known
Character						
General Attitude & Personality						
Ability to get along with others						
Communication skills						
Trustworthiness / Dependability						
Honesty						
Willingness to take initiative						
Leadership						
Observance of rules & regulations						
Acceptance of supervision						
Behavior / Emotional stability						
Personal habits / Grooming						
Safety habits						
Common sense / Judgment						
Ability to work with children						

1. How long have you known the applicant? _____

2. What is your relationship to the applicant? _____

3. Do you know of any reason the applicant should not work in a setting with children? ___ Yes ___ No

If yes, why? _____

4. If you are a previous employer, would you rehire this person? _____ If no, why? _____

5. What do you feel are this person's major strengths and weaknesses? Please be specific.

6. Would you let the applicant babysit your own child(ren)? ___ Yes ___ No

Name of reference (please print): _____ Date: _____

Signature: _____ Phone: _____