

YMCA of Trenton Employment Application

YMCA Mission

The YMCA of Trenton's mission is to provide opportunities to all individuals and families by putting values and principles into practice through programs and activities that build a healthy spirit, mind and body. The YMCA is a member of an international organization which accepts diversity and promotes community development and cooperation.

Please type or print. Application must be completely filled out in order to be considered.

PERSONAL DATA

Last Name	Middle Initial	First Name
Address		
City	State	Zip
Home Telephone Number		Cell Phone Number
Email Address		Social Security Number
Position(s) Applied For		YMCA Center

REFERRAL SOURCE

Have you been previously employed by the YMCA of Trenton or another YMCA? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please list when/where and dates
Do you have any relatives who are employed by the YMCA of Trenton? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, name of relative
How did you hear about us? <input type="checkbox"/> Walk in <input type="checkbox"/> Signs at center <input type="checkbox"/> Web Page <input type="checkbox"/> Referral <input type="checkbox"/> Advertisement <input type="checkbox"/> Employee <input type="checkbox"/> Relative <input type="checkbox"/> Private employment agency <input type="checkbox"/> Other _____

WORK AVAILABILITY

<input type="checkbox"/> Full time (35 hours or more per week) <input type="checkbox"/> Regular Part time (20-34 hours per week) <input type="checkbox"/> Limited Part time (19 hours or less)							
Specify Hours:	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Start:							
End:							
Any restrictions to work hours?							
Desired Salary:							
Are you currently employed?						<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you on a lay-off or subject to recall?						<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you are under the age of 17 and it is required, can you furnish a work permit?						<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of a felony? (You are not obligated to disclose sealed or expunged records of convictions or arrests)						<input type="checkbox"/> Yes	<input type="checkbox"/> No
In case of an emergency, please contact							
Name			Phone Number			Work Number	

REFERENCES

Please list three business references. If you have never been employed or have not had three employers, you may list three personal, non-family references. Examples of personal references could be a teacher, neighbor, coach, clergyman, or family friend.

1	Name	Phone Number	Relationship
2	Name	Phone Number	Relationship
3	Name	Phone Number	Relationship

CERTIFICATIONS

Do you hold a current CPR certification?	Yes ____	Expiration _____	No _____
Do you hold a current first aid certification?	Yes ____	Expiration _____	No _____
Do you hold a current lifeguarding certification?	Yes ____	Expiration _____	No _____
List any relevant certification and/or volunteer experiences that would strengthen your application.			

EMPLOYMENT - *Please list all employers starting with the most recent.*

EMPLOYER 1

COMPANY NAME			PHONE NUMBER		
ADDRESS			FROM (MONTH/YEAR)		
CITY		STATE	ZIP CODE		TO (MONTH/YEAR)
STARTING SALARY	FINAL SALARY		JOB TITLE		
MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO		SUPERVISOR'S NAME AND TITLE			
DUTIES					
REASON FOR LEAVING					

EMPLOYER 2

COMPANY NAME			PHONE NUMBER		
ADDRESS			FROM (MONTH/YEAR)		
CITY		STATE	ZIP CODE		TO (MONTH/YEAR)
STARTING SALARY	FINAL SALARY		JOB TITLE		
MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO		SUPERVISOR'S NAME AND TITLE			
DUTIES					
REASON FOR LEAVING					

EDUCATION

SCHOOL AND LOCATION	YEARS COMPLETED	DIPLOMA/ DEGREE	MAJOR	MINOR
HIGH SCHOOL		<input type="checkbox"/> YES <input type="checkbox"/> NO		
COLLEGE/UNIVERSITY		<input type="checkbox"/> YES <input type="checkbox"/> NO		
GRADUATE SCHOOL		<input type="checkbox"/> YES <input type="checkbox"/> NO		
TECHNICAL/VOCATIONAL SCHOOL		<input type="checkbox"/> YES <input type="checkbox"/> NO		
OTHER		<input type="checkbox"/> YES <input type="checkbox"/> NO		

LIST SPECIAL HONORS AND/OR EXTRACURRICULAR ACTIVITIES

APPLICANT'S STATEMENT *Please read carefully*

I certify that all information I have provided in order to apply for and secure work with the 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 YMCA's service, whenever it is discovered. Initial_____

I expressly authorize, without reservation, the YMCA, its representatives, employee 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, resume 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 that upon offer of employment, the YMCA of Trenton will conduct a criminal background check prior to and during my employment as well as 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 YMA does not discriminate in hiring or employment on the basis of race, color, veteran's status, religious creed, national origin, sex, 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 (YMCA of Trenton) 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

SIGNATURE OF PARENT IF APPLICANT IS UNDER 18 YRS OF AGE DATE

