

WALLINGFORD FAMILY YMCA

Employment Application

We Build Strong Kids, Strong Families, Strong Communities

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 on the basis of race, color, religion, national origin, sex, disability, age or any other status protected by law



Personal Information

Position Applying For: _____ Date: _____

Name: _____ Email: _____

Address: _____
Street City STATE Zip

Telephone: Home _____ Cell _____ Business _____

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 U.S.? Yes No

Can you perform the essential functions of the job for which you are applying with or without reasonable accommodation? Yes No

How did you hear about this opening?
Name of referral source: _____

<input type="checkbox"/> YMCA Staff Referral	<input type="checkbox"/> YMCA Member
<input type="checkbox"/> School	<input type="checkbox"/> Advertisement
<input type="checkbox"/> Walk-in	<input type="checkbox"/> Online posting site
<input type="checkbox"/> YMCA website	<input type="checkbox"/> Other

Notice to All Applicants

The Wallingford Family 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.

Employment History		List all previous employment during the past seven years starting with the most recent. Use additional sheets if necessary.	
Employer	Telephone	Dates Employed	Summarize the nature of the work performed and job responsibilities.
Address		From: _____ / _____ To: _____ / _____	
Job Title			
Immediate Supervisor & Title			
Reason for Leaving		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employer	Telephone	Dates Employed	Summarize the nature of the work performed and job responsibilities.
Address		From: _____ / _____ To: _____ / _____	
Job Title			
Immediate Supervisor & Title			
Reason for Leaving		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employer	Telephone	Dates Employed	Summarize the nature of the work performed and job responsibilities.
Address		From: _____ / _____ To: _____ / _____	
Job Title			
Immediate Supervisor & Title			
Reason for Leaving		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employer	Telephone	Dates Employed	Summarize the nature of the work performed and job responsibilities.
Address		From: _____ / _____ To: _____ / _____	
Job Title			
Immediate Supervisor & Title			
Reason for Leaving		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Please explain any gaps in your employment history _____

Personal References

Do not list relatives or past employers.

Name: _____ Relationship: _____ Years Known: _____
 Address: _____ City: _____ ST _____ Zip _____
 E-Mail: _____ Phone: _____

Name: _____ Relationship: _____ Years Known: _____
 Address: _____ City: _____ ST _____ Zip _____
 E-Mail: _____ Phone: _____

Name: _____ Relationship: _____ Years Known: _____
 Address: _____ City: _____ ST _____ Zip _____
 E-Mail: _____ Phone: _____

Application Acknowledgement and Authorization**Please read all statements and sign below:**

I authorize both the Wallingford Family 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 Wallingford Family 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 Wallingford Family YMCA or myself. I understand that, other than the CEO of the YMCA, no manager, supervisor or representative of the Wallingford Family 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 Wallingford Family 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 Wallingford Family 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 Wallingford Family YMCA policies and rules at all times. I acknowledge that I have read the above statements and understand them.

Signature: _____ Date: _____

Rev 9/2018