

Life Guarding
Other/Professional License:

## Putnam County YMCA: An Equal Opportunity Employer Application for Employment

Thank you for your interest in employment with the YMCA of the Putnam County Area. The YMCA is an equal opportunity employer and selects the best matched individual for each position based on job-related qualifications, regardless of race, religion, national origin, age, sex, veteran status under state, federal or local employment laws.

## Please print & fill out this form fully and accurately. Please let us know if you need assistance completing this form. Email: Date of Birth / / Are you at least 16 years old (or) 18 years old Address:\_\_\_\_\_ Zip Code:\_\_\_\_\_ Emergency Contact Information Name: Phone Number ( ) - Relationship Education History: Circle Highest Grade Completed 8 9 10 11 12 College: 1 4 Graduate School: 1 2 3 School Name and Address Diploma/Degree Earned Schools Grade Average Degree/Area of Specialization High School or GED College Graduate School Other/Tech School Certifications, License & Specialized Skills From Whom? Certification(s) Expiration Date (s) CPR First Aid

**Employment History** 

Dates	Employed By	Position Held	Rates of Pay	Rates of Pay Primary Responsibilities		Reason for Leaving
From: To:	Employer:					
	Address:					
From: To:						
	Employer:					
	Address:					
From: To:	Employer:					
	Address:					
Position applying for?Have you ever been employed by any YMCA? If yes, where, when and what position did you hold?						
Relatives Employed	d by the PCYMCA? Relative	es Name:	Relationship:Posistion:			
Why would you like to work at the YMCA: Pay Rate Desired:\$ per hour						
Professional/Work references we may contact						
	Name	Address			Phone Number	
Have you ever been convicted of a misdemeanor or a felony, received deferred adjudication, or probation, pled guilty or no contest to any criminal offense, or been convicted in a military court-martial? Important: For purposes of employment with this YMCA, "conviction" included sentenced to confinement, paid a fine, time served, placed on probation (including deferred adjudication) and/or any court-ordered restitution: _ yes _ no Note: A conviction record will not necessarily be a bar to employment. Factors such as age, time of offense, seriousness, nature of the violations and rehabilitation will be taken into consideration.						
Thank you for taking the time to complete this application. Please read the following carefully before you sign below.						
I understand that this is only an application for employment, that no employment is being offered, and that this and any other YMCA documents are not contracts of employment. I understand that any oral or written statements to the contrary are hereby expressly disavowed and should not be relied upon by any prospective or existing employee. Any person who is hired will be employed "at-will" and may voluntarily leave employment without notice or may be terminated by the YMCA without notice at any time, for any reason. I understand that the YMCA is free to change wages, benefits, policies, and conditions of employment at any time.						
I understand that proof of identity and legal eligibility for employment will be required upon employment. I understand that the Putnam County YMCA believes and practices four core values: Honesty, Respect, Responsibility and Caring. I understand that the YMCA is a drug-free employer and has a Substance Abuse Policy which includes, but is not limited to, pre-employment screening, as well as random, post-accident, and "reasonable suspicion" testing.						
I understand that any offer of employment is contingent upon successful.ly passing a criminal history review, in addition to any interviews and required certifications/licenses. Additionally, a physical examination, and verification of an acceptable motor vehicle driving record may be required for applicable job categories.						
I certify that all statements and information I have given in the course of applying for a position with the YMCA are true and complete. I authorize the YMCA to thoroughly investigate and verify all data, oral statements, and related papers submitted in relation to my application for employment or termination, if hired, regardless of time of discovery. I agree to abide by all present and any subsequently issued rules and policies of the YMCA.						
Signature of Applic	ant:	Date:				