



**FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY**

## EMPLOYMENT APPLICATION

**The Cass County Family 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 Cass County Family Y's 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.



**Position Applying For:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Are you willing to accept other positions:** \_\_\_\_\_ **Date Available:** \_\_\_\_\_

### Personal Information

**NAME:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Last**                      **First**                      **MI**

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**Telephone: Home**                      **Mobile**                      **Other**

Are you 18 years of age or older? **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 accommodation? **Yes**      **No**

Have you ever been convicted of a crime, pled no contest, or had adjudication withheld? If yes, please provide a date, location, charges and a complete explanation of all offenses. *(A conviction will not necessarily bar employment. The YMCA may consider the nature, date and circumstances of the offenses.)* **Yes**      **No**

**\*Notice to All Applicants: The Cass County Family YMCA enforces its policies and practices to prevent child abuse.**

Allegations or suspicions of child abuse are taken very seriously at The Cass County Family 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 Information

List available days/hours:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Preferred Job Status:  Full-time  Part-time  Seasonal  As Needed

Yes  No

Have you previously been employed by this YMCA or any other YMCA?

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?

Yes  No

If yes, name(s) and relationship:

How did you hear about this opening?

Y Staff referral

Y Member

Name of referral source:

School

Advertisement

Walk-in

Other \_\_\_\_\_

YMCA website

## Education & Training

### Educational Background

	Name of School	City, State	Diploma Awarded	Degree	Major
<input type="checkbox"/> High School <input type="checkbox"/> GED			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress		
College			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress		
Graduate School			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Progress		
Vocational/ Other			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 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

<b>Employment History</b>		<b>List all previous employment during the past seven years starting with the most recent. Use additional sheets if needed.</b>	
<b>Employer</b>	Telephone /	<u>Dates Employed</u> From: ___/___	Summarize the nature of the work performed and job responsibilities.
Address		To: ___/___	
Job Title		<u>Starting Hourly Rate/Salary</u>	
Immediate Supervisor and Title		\$ _____ per _____	
Reason for Leaving		<u>Ending Hourly Rate/Salary</u>	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$ _____ per _____	
<b>Employer</b>	Telephone /	<u>Dates Employed</u> From: ___/___	Summarize the nature of the work performed and job responsibilities.
Address		To: ___/___	
Job Title		<u>Starting Hourly Rate/Salary</u>	
Immediate Supervisor and Title		\$ _____ per _____	
Reason for Leaving		<u>Ending Hourly Rate/Salary</u>	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$ _____ per _____	
<b>Employer</b>	Telephone /	<u>Dates Employed</u> From: ___/___	Summarize the nature of the work performed and job responsibilities.
Address		To: ___/___	
Job Title		<u>Starting Hourly Rate/Salary</u>	
Immediate Supervisor and Title		\$ _____ per _____	
Reason for Leaving		<u>Ending Hourly Rate/Salary</u>	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$ _____ per _____	
<b>Employer</b>	Telephone /	<u>Dates Employed</u> From: ___/___	Summarize the nature of the work performed and job responsibilities.
Address		To: ___/___	
Job Title		<u>Starting Hourly Rate/Salary</u>	
Immediate Supervisor and Title		\$ _____ per _____	
Reason for Leaving		<u>Ending Hourly Rate/Salary</u>	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$ _____ per _____	
Please explain any gaps in your employment history.			
What other business experience, personal experience or training have you had that may have prepared you for this position?			

<b>Personal References</b>				<b>Do not list relatives or past employers.</b>			
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#:			
				/			

<b>Application Acknowledgement and Authorization</b>			
<b>Please read all statements and sign below:</b>			
<p>I authorize both The Cass County Family Y 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.</p> <p>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.</p> <p>If I am employed by The Cass County Family Y I understand my employment can be terminated, with or without cause and with or without notice, at any time at the option of The Cass County Family Y or myself. 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 Cass County Family Y.</p> <p>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 Cass County Family Y is not obligated to retain or consider this application for future openings. If hired, I agree to abide by The Cass County Family Y's policies and rules at all times. I acknowledge that I have read the above statements and understand them.</p>			
Signature:		Date:	



## Notice and Authorization Concerning Consumer and Investigative Consumer Reports

This form, which you should read carefully, has been provided to you because The Cass County Family YMCA ("Organization") may request a criminal background report in connection with your application for employment, or at any time during the course of employment with the Organization, if any, for purposes of evaluating your suitability for employment, promotion, reassignment or retention as an employee. Additionally, in the event that claims or disputes between you and The Cass County Family YMCA are filed with any third parties, the organization may request investigative reports for purposes of evaluation and response, regardless of whether you remain in the employ of the Organization at the time such claims or disputes arise.

The types of reports that may be requested from Background Investigation Bureau or other registry under this policy include, but are not limited to, criminal records checks including sex offender registries, court records checks, driving records, and/or summaries of educational and employment records and histories, and credit checks. **Please note:** The YMCA will maintain the complete confidentiality of all information obtained through criminal background checks, reference checks, and all information on application forms, including information regarding disqualification decisions.

**The Cass County Family YMCA will not discriminate against any person on the basis of race, color, creed, sex, religion, age, disability, national origin, citizenship, or marital status.**

### Authorization

I have carefully read and understand this notice and authorization form and, by my signature below, consent to the release of criminal background search reports, as defined above, to The Cass County Family YMCA (1) in conjunction with my application for employment, (2) during the entire course of my employment, if any, and (3) after any such employment ends. I further understand that any and all information contained in my job application or otherwise disclosed to the YMCA by me before, during or after my employment, if any, may be utilized for the purpose of obtaining the criminal background search reports requested by the Organization and confirm that all such information provided in connection with my application is true and correct. I understand and acknowledge that nothing in this notice and authorization is intended to be, or is, a guarantee of employment or a promise of continued employment. If employed by the YMCA, my employment will not be for a specified period of time and can be terminated at any time for any reason, with or without cause or notice, by me or by The Cass County Family YMCA.

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
\*Social Security number

\_\_\_\_\_  
Full address, including ZIP code

\_\_\_\_\_  
\*Date of birth (mm/dd/yy)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\* required

*For office use only:*

\_\_\_\_\_  
Department

Minor? \_\_\_Yes \_\_\_No