



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

APPLICATION FOR EMPLOYMENT WESTFIELD AREA YMCA

Position(s) being applied for:

We consider each application without regard to sex, race, creed, color, religion, national origin, ancestry, age, marital, civil union or domestic partner status, gender, gender identity or expression, sexual or affectional preference, transgender status, disability, income, atypical hereditary cellular or blood trait, genetic information or testing, handicap, military or veteran status or any other legally protected characteristic under applicable federal, state or local laws. Reasonable accommodations will be made for applicants with disabilities and qualified new hires.

**** Notice to Applicants ****

The YMCA maintains "zero tolerance" for child abuse and/or substance abuse.

Criminal background check and other federal or state screenings for child abuse and other criminal convictions will be conducted upon offer of employment.

Screening tests for alcohol and illegal drug use may be required upon offer of employment and during employment.

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

Personal Data

Name _____ Home Phone _____

Address _____ Cell Phone _____

City _____ State _____ Zip _____

Email Address _____

Previous residence (Address, City, State, Zip): _____

Previous residence (Address, City, State, Zip): _____

Previous residence (Address, City, State, Zip): _____

- Have you previously worked for any YMCA? Yes No
If yes, when _____
YMCA Name & Address _____

- Are you 18 years of age or older? Yes No If not, you will be required to furnish working papers upon hire.

- Do you have any pending criminal charges or have you ever pled guilty or been convicted of a crime, felony, disorderly persons offense, drunk driving offense? Do not include convictions that have been annulled, expunged or sealed by a court.
 No Yes, detail _____

Answering "yes" to these questions does not constitute an automatic bar to employment but will be considered in relation to the position sought.

Employment Availability

What type of position are you applying for: ___ Full time ___ Regular Part-time ___ Seasonal ___ Other

When are you available (check all that apply)? Available start date? _____

___ Mornings ___ Days ___ Evenings ___ Late Evenings ___ Weekends

Any restrictions to work hours? _____ Salary Desired: \$ _____

Employment & Volunteer History

Provide information of your past and current employers or assignments, **starting with the most recent** (use additional sheets if necessary).

Employer _____ Telephone (____) _____	Employed From _____ To _____	Summarize the type of work performed and job responsibilities
Address: _____ Email Address: _____		
Job Title _____	Hourly Rates/ Salary Starting \$ _____ per	
Immediate supervisor and title _____		
Reason for leaving _____		
Employer _____ Telephone (____) _____	Employed From _____ To _____	Summarize the type of work performed and job responsibilities
Address: _____ Email Address: _____		
Job Title _____	Hourly Rates/ Salary Starting \$ _____ per	
Immediate supervisor and title _____		
Reason for leaving _____		
Employer _____ Telephone (____) _____	Employed From _____ To _____	Summarize the type of work performed and job responsibilities
Address: _____ Email Address: _____		
Job Title _____	Hourly Rates/ Salary Starting \$ _____ per	
Immediate supervisor and title _____		
Reason for leaving _____		
Employer _____ Telephone (____) _____	Employed From _____ To _____	Summarize the type of work performed and job responsibilities
Address: _____ Email Address: _____		
Job Title _____	Hourly Rates/ Salary Starting \$ _____ per	
Immediate supervisor and title _____		
Reason for leaving _____		

Non-employment Record

Include explanation of all lapses in employment on preceding page.

From		To		Reason
Mo.	Yr.	Mo.	Yr.	
Mo.	Yr.	Mo.	Yr.	
Mo.	Yr.	Mo.	Yr.	
Mo.	Yr.	Mo.	Yr.	

Education

School Name & Address (high school, college, trade)	Major Course or Degree Program	Diploma/Degree Received

References

List 6 references/people that know you well and can attest to your abilities and suitability for YMCA employment (**one reference must be a family member--all other references must be non-relatives**). **DO NOT LIST CURRENT EMPLOYEES OR BOARD MEMBERS AS REFERENCES.**

Name	Email address	Address and phone number	Relationship to you	Years Known
1.			FAMILY -	
2.				
3.				
4.				
5.				
6.				

Additional Information

Do you hold current CPR certification? Yes No
 Expire Date: _____

Do you hold current first aid certification? Yes No
 Expire Date: _____

Do you hold current lifeguarding certification? Yes No
 Expire Date: _____

Other certifications:
 Type: _____ Expire Date: _____

Type: _____ Expire Date: _____

How did you find us? (if applicable)

- Walk-in
- YMCA Lawn Signs
- YMCA Website
- College Website/Job Fair
 - UCC Kean Univ Other_____
- Advertisement
 - NJN.Com Indeed Craig's List
 - TAP Facebook Other_____
- Referral _____
- Employee_____

Applicant's Statement

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 Y's service, whenever it is discovered. **Initial** _____

I expressly authorize, without reservation, the Westfield Area YMCA, its representatives, employees 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 upon offer of employment, the YMCA will conduct a criminal background check prior to and during my employment as well as a 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 YMCA does not discriminate in hiring or employment on the basis of race, color, veteran's status, religious creed, national origin, sex, ancestry, age or any other protected category; 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 (the Westfield Area YMCA) 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's statement. Do not sign until you have read and initialed the above statements.

Signature of Applicant

Date

Signature of Parent (if applicant is under 18 years of age)

Date

Parent's Name (please print): _____

OUR MISSION
The Westfield Area YMCA is a nonprofit human service organization dedicated to developing the full potential of every individual and family in the communities it serves through programs that build healthy spirit, body, and mind for all.

**Westfield Area YMCA
Drug Screening Policy**

All offers of employment made by the Westfield Area YMCA will be conditional offers of employment contingent upon

- (1) the applicant's submission to a drug screening, and
- (2) the drug screening results being negative for illegal drug use.

Applicants offered employment by the Westfield Area YMCA will then be requested to sign a consent form agreeing to participate in a drug screening and authorizing the submission of the results of that drug screening to the Westfield Area YMCA.

Offers of employment will be revoked when applicants refuse to participate in a drug screening within 24 hours, when applicants refuse to authorize the release of the results of the drug screening to the Westfield Area YMCA or if applicants test positive for illegal drug use.

Applicant's Name: _____

Applicant's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

(If Under 18 Years of Age, Parental Consent is Required)

Revision: 01/2012