



Franklin County's YMCA

APPLICATION FOR EMPLOYMENT

451 Main Street,
Greenfield, MA 01301
413 773 3646
www.YOUR-Y.org

Date _____ Position Applying For _____

Applicant for employment are considered without regard to race, creed, color, religion, sex, sexual orientation, marital status, genetic information, national origin, age, and disability, military or veteran status, Vietnam Era Veteran, or being a member of the Reserves or National Guard. Also it is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. Any employer who violates this law shall be subject to criminal penalties and civil liability. **PLEASE COMPLETE ALL SECTIONS, EVEN IF FURNISHING A RESUME.**

PERSONAL

Last Name	First Name	Middle
Street	City	State
		Zip
Home Phone	Cell Phone	Email Address

Are you over the age of 18? () Yes () No If not, please attach work permit (& doctor's certificate if required)

If hired, can you provide proof of your legal right to work in the United States? () Yes () No

Have you worked for a YMCA previously? () Yes () No If yes, when? _____

In case of emergency, contact _____

Relationship _____ Home Phone _____

Address _____ Work Phone _____

Can you meet all of the requirements described in the job description with or without reasonable accommodation? () Yes () No

(Proof of authorization to work and of your identity will be required upon employment)

RECORD OF EDUCATION

School	Name & Address of School	Course of Study	Check Last Year Completed	Did You Graduate?	List Diploma or Degree
High School			1 _____	() Yes	
			2 _____		
			3 _____	() No	
			4 _____		
College			1 _____	() Yes	
			2 _____		
			3 _____	() No	
			4 _____		

EMPLOYMENT HISTORY

List below all past and present employment, beginning with most recent.

1	Employer	Dates		WORKED PERFORMED
		From	To	
	Address			
	Job Title	Hourly Rate/Salary		
		Starting	Final	
	Supervisor			
	Reason for leaving			

2	Employer	Dates		WORKED PERFORMED
		From	To	
	Address			
	Job Title	Hourly Rate/Salary		
		Starting	Final	
	Supervisor			
	Reason for leaving			

3	Employer	Dates		WORKED PERFORMED
		From	To	
	Address			
	Job Title	Hourly Rate/Salary		
		Starting	Final	
	Supervisor			
	Reason for leaving			

VOLUNTEERISM

List below all past and present volunteering you have been a part of.

Where have you volunteered?	What duties did you perform?	When did you volunteer?

REFERENCES

People who have known you for at least 1 year.
(Include 1 relative, former employer and social acquaintances, ie. teachers, ministers, counselor.)

Name	Relationship	Address	Phone Number

YMCA VALUES

Our goal at this YMCA is to provide the best programs and service possible. That means more than just providing an activity or service. We believe character development is an important aspect of what we do. YMCA character development is a challenge for all of us — staff, volunteers, members, participants, and parents — to accept and demonstrate positive values. These values are **caring, honesty, respect, and responsibility**. While none of us are perfect, we can all strive to improve. We think good character makes a better staff member, family member, YMCA member, program leader and community leader.

If you become a YMCA employee, you will be expected to accept and demonstrate the values of caring, honesty, respect and responsibility on and off the job.

Why do you want to work at our YMCA?

STATEMENT OF APPLICANT

In Franklin County's YMCAs effort to attract the highest quality of staff, I have been advised that as part of the application process for employment with the YMCA, an extensive inquiry will be made concerning my prior employment activities, and character, and I fully consent to and authorize all such inquiries.

In the event of my employment by the YMCA, I will comply with all policies set forth in the personnel manual and with other policies established from time to time by the organization. I authorize the YMCA to request my employment record from any former employer(s). I further understand that inquiries may be made concerning my background, experience and prior employment. I hereby waive any right to claim that any request or investigation is an invasion of my privacy, since they are made with my consent and it is in my interest that I be considered for employment. I understand that my employment is contingent upon a clean criminal history background check.

I understand that it is this agency's right to secure conviction criminal information* as part of the pre-employment screening process. I understand that Franklin County's YMCA does not condone child abusers and that the YMCA will be seeking information in my background related to child abuse. *NOTE: All YMCA employees will have a criminal records check (CORI) and a sexual records check (SORI).

I certify that all statements made by me on this application form are true to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand and agree that any misrepresentation or omission of facts would exclude my being considered for employment, or after employment, may be cause for termination of employment with the YMCA.

I understand that the YMCA will take any allegations or suspicions of child abuse seriously and will report such allegations to the police and state agencies for investigation. I also understand that the YMCA strongly recommends that YMCA staff members never place themselves in a position that requires fraternizing alone, inside or outside of the YMCA with children from Y programs or Y memberships (for example, inviting children to your home, going out for pizza/movie, providing childcare, providing transportation to or from YMCA programs, etc.).

I understand and agree that if I am employed, there is no contract period for employment and my employment would be solely an "employment at will" giving either me or the YMCA the right to terminate my employment at any time without liability or obligation, except for my regular pay through the date of termination.

The facts set forth in my application for employment are true and complete. I understand that if employed, false information on this form, or failure to disclose material facts will be considered grounds for discharge.

If employed, I am required to abide by all established policies and procedures of the YMCA.

I hereby acknowledge that I have read and understand the above statement and that I voluntarily sign this application.

Name (print clearly)

Signature

Date