CENTRAL CONNECTICUT COAST YMCA

An Equal Opportunity Employer

Date Received

_____

APPLICATION FOR EMPLOYMENT

Please Print Except Where Signature Required

Date _____

Name_____Social Security Number_____

Position _____Start Date_____Salary Requirements_____

Type of Employment ☐ Part-time ☐ Full-time ☐ Summer Availability (Days/Hours) _____

Present Address _____
Street City State Zip Code How Long?

Previous Address _____
Street City State Zip Code How Long?

Home Phone_____ Work Phone _____Cell Phone_____

Email Address_____

Have you applied for employment or worked for any YMCA in the past? ☐ Yes ☐ No

If Yes: When, Association/Branch, Department(s) or Program, Supervisor?_____

Have you ever been enrolled in the YMCA Retirement Fund? If yes, identify the YMCA and when. ☐ Yes ☐ No

Are you legally authorized to be employed in the United States? ☐ Yes ☐ No
Per Federal Law, you will be required to verify your identity and your authorization or eligibility to be employed in the United States ***if*** *you are offered employment.*

Have you ever been **convicted** of a criminal offense (motor vehicle, misdemeanors and/or felonies)? ☐ Yes ☐ No
If **yes**, provide nature of offense, date & punishment & status._____

_____

Convictions will be considered in relation to specific jobs and requirements. They do not automatically disqualify an applicant. Criminal background check will be completed prior to an offer of employment).

Are you 18 years of age or older? (Requested for compliance to applicable state and federal laws) ☐ Yes ☐ No
If you are offered employment, proof of minimum age will be required.

Were you ever in the US Armed Forces? ☐ Yes ☐ No
If yes, please furnish branch, dates of duty and type of discharge._____

Are you aware of any physical and/or mental impairments that could affect the performance of the duties of the position you are seeking?

☐ Yes Please explain_____ ☐ No

Do you possess a valid driver's license? ☐ Yes What state?_____ ☐ No?

Do you have personal use of an automobile? ☐ Yes ☐ No

Education

Level	School with Address	Dates (Mo/Yr) From/To	Major Course of Study	Graduated Degree Earned
High School				☐ Yes ☐ No _____
College				☐ Yes ☐ No _____
Grad. School				☐ Yes ☐ No _____
Trade, Business Or Correspondence				☐ Yes ☐ No _____

Employment History

List all work experience beginning with most recent and including any periods of self-employment. Attach additional sheets as necessary. If you do not have 5 years of previous work experience, please write a statement explaining why below.

1. Company Name _____ Employed From _____ To _____

Address _____

Street City State Zip Code Phone

Title _____ Type of Employment ☐ Part-time ☐ Full-time ☐ Temporary

Rate of Hourly Pay – Start _____ End _____ Annual Salary _____

Name and Title of Immediate Supervisor _____

Description of Duties _____

_____

Reason for Leaving _____

2. Company Name _____ Employed From _____ To _____

Address _____

Street City State Zip Code Phone

Title _____ Type of Employment ☐ Part-time ☐ Full-time ☐ Temporary

Rate of Hourly Pay – Start _____ End _____ Annual Salary _____

Name and Title of Immediate Supervisor _____

Description of Duties _____

_____

Reason for Leaving _____

3. Company Name _____ Employed From _____ To _____

Address _____

Street City State Zip Code Phone

Title _____ Type of Employment ☐ Part-time ☐ Full-time ☐ Temporary

Rate of Hourly Pay – Start _____ End _____ Annual Salary _____

Name and Title of Immediate Supervisor _____

Description of Duties _____

_____

Reason for Leaving _____

If you do not have at least 5 years previous work experience please explain _____

_____

May we contact the employers listed above for references? ☐ **Yes** ☐ **No**

If yes, please sign the authorization which follows:

I hereby authorize _____, _____, & _____

Employer Employer Employer

to release information from my personnel file to the appropriate YMCA unit executive in connection with this application for employment.

Signature of Applicant _____ Date _____

Skills

Check computer proficiencies ☐ Main Frame ☐ Word ☐ Excel ☐ Publisher ☐ Access ☐ Internet Other _____

List any special skills you may have. _____

List any hobbies or special interests outside of business. _____

References

Include at least two direct supervisors or those who can comment on your work performance. You may include only unrelated personal references.

1. Name_____Phone_____

Company_____Title_____

Relation to Applicant_____Length of Time Known_____

2. Name_____Phone_____

Company_____Title_____

Relation to Applicant_____Length of Time Known_____

3. Name_____Phone_____

Company_____Title_____

Relation to Applicant_____Length of Time Known_____

4. Name_____Phone_____

Company_____Title_____

Relation to Applicant_____Length of Time Known_____

I understand that if I misrepresent or omit any facts in connection with my application for employment, my application will be subject to rejection by the ***Central Connecticut Coast YMCA*** *and if I am hired, I will be subject to discharge from employment. In addition, if I am covered by a written agreement that prohibits my discharge without just cause, I understand and agree that such misrepresentations or omissions shall constitute just cause.* _____*(please initial)*

I further understand and agree that granting me an interview or scheduling or conducting any pre-employment tests or screens does not constitute a promise of employment or create a contract of employment. No promises or inducements to take employment have been made and no contracts regarding employment have been offered; and I understand and agree that no such promises, inducements or contracts are binding upon the ***Central Connecticut Coast YMCA*** *unless made in writing and signed by the President/CEO. I further understand and agree that if I am employed by the.* ***Central Connecticut Coast YMCA****, I will have the right to terminate my employment at any time for any reason; and that the* ***Central Connecticut Coast YMCA*** *will have a similar right, subject to the provisions of any written agreement signed by the appropriate branch executive of the* ***Central Connecticut Coast YMCA*** *which may be applicable to me.*
_____*(please initial)*

Applicant's Signature_____Date_____

11/02 Revised 4/04