



# YMCA of Broome County Employment Application

Equal Opportunity Employer

The YMCA of Broome County is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status. Your completed application will be reviewed carefully, but does not imply that you will be employed with the YMCA of Broome County.

## Personal Information

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
                    First                                      Middle                                      Last

Address: \_\_\_\_\_  
                                    Street                                      City                                      State                                      Zip

Phone Number: \_\_\_\_\_ Are you over 18 years old: \_\_\_\_\_ YES \_\_\_\_\_ NO

Are you eligible for employment in the United States: \_\_\_\_\_ YES \_\_\_\_\_ NO  
(If offered employment, you will be required to provide proof)

## General Applicant Information

Position applying for: \_\_\_\_\_ Date Available: \_\_\_\_\_

Desired Salary: \_\_\_\_\_ Availability: \_\_\_\_\_ Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ On-Call

Shift Availability: \_\_\_\_\_ First Shift \_\_\_\_\_ Second Shift \_\_\_\_\_ Third Shift \_\_\_\_\_ Weekdays \_\_\_\_\_ Weekends

Have you ever applied for employment with the YMCA of Broome County: \_\_\_\_\_ YES \_\_\_\_\_ NO

If yes, when: \_\_\_\_\_

Have you ever worked for the YMCA: \_\_\_\_\_ YES \_\_\_\_\_ NO If yes, please detail: \_\_\_\_\_

Have you ever been terminated or asked to resign: \_\_\_\_\_ YES \_\_\_\_\_ NO

If yes, please explain: \_\_\_\_\_

Have you ever been convicted of a Misdemeanor or Felony: \_\_\_\_\_ YES \_\_\_\_\_ NO

If yes, please explain: \_\_\_\_\_

(Please note that a conviction or pending charge is not an automatic disqualification of employment. The YMCA abides by all Federal, State and local laws. Please give all the facts so that a fair decision can be made.)

**Employment History**

Please list 10 years of employment history. If you need additional room, please attach a separate sheet of paper.

**Current/Last Employer:** \_\_\_\_\_ **Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Job Title:** \_\_\_\_\_ **Job Duties:** \_\_\_\_\_

**Supervisor's Name:** \_\_\_\_\_ **Reason for leaving:** \_\_\_\_\_

**May we contact this employer:** \_\_\_\_ YES \_\_\_\_ NO **Ending Salary:** \_\_\_\_\_

**Current/Last Employer:** \_\_\_\_\_ **Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Job Title:** \_\_\_\_\_ **Job Duties:** \_\_\_\_\_

**Supervisor's Name:** \_\_\_\_\_ **Reason for leaving:** \_\_\_\_\_

**May we contact this employer:** \_\_\_\_ YES \_\_\_\_ NO **Ending Salary:** \_\_\_\_\_

**Current/Last Employer:** \_\_\_\_\_ **Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Job Title:** \_\_\_\_\_ **Job Duties:** \_\_\_\_\_

**Supervisor's Name:** \_\_\_\_\_ **Reason for leaving:** \_\_\_\_\_

**May we contact this employer:** \_\_\_\_ YES \_\_\_\_ NO **Ending Salary:** \_\_\_\_\_

**Current/Last Employer:** \_\_\_\_\_ **Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Job Title:** \_\_\_\_\_ **Job Duties:** \_\_\_\_\_

**Supervisor's Name:** \_\_\_\_\_ **Reason for leaving:** \_\_\_\_\_

**May we contact this employer:** \_\_\_\_ YES \_\_\_\_ NO **Ending Salary:** \_\_\_\_\_

**Education**

High School Diploma/GED: \_\_\_\_\_ YES \_\_\_\_\_ NO

**College and/or Vocational School:**

School \_\_\_\_\_ City/State \_\_\_\_\_

Major \_\_\_\_\_ Degree Earned \_\_\_\_\_

Graduation/Anticipated Graduation Date \_\_\_\_\_

**Other Training or Degrees:**

School \_\_\_\_\_ City/State \_\_\_\_\_

Major \_\_\_\_\_ Degree Earned \_\_\_\_\_

Graduation/Anticipated Graduation Date \_\_\_\_\_

**Relevant Experience and/or Special Skills**

**Please list any relevant experience or special skills you have in connection to the job you have applied for:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please Read Carefully Before Signing**

I hereby certify that the information provided on this application is true and accurate to the best of my knowledge and is subject to verification by the YMCA of Broome County or it's designated agent. In the event that I am employed, I understand that all employees are subject to termination at the discretion of the YMCA. I understand that if selected for employment by the YMCA, all terms and conditions of employment are subject to change at any time. I understand that if I am employed with the YMCA, my employment is at will and may be terminated by either myself or the YMCA at any time. I also understand that any misrepresentations made by me in completing this application shall be considered as sufficient cause for either my non-consideration for the position I am applying for or if employed, my dismissal without advanced notice. In the event of my employment with the YMCA, I will comply with all rules and regulations as set forth in the YMCA's policy manual or other communications distributed to employees and I understand a condition of my continued employment will be my compliance with the YMCA's controlled substance abuse and testing policy. I understand that my employment is conditional upon my satisfactorily passing any required driver record check, criminal history record check, State Central Registry check, physical examination, and/or drug screening. I understand that completion of this form does not guarantee me employment with the YMCA of Broome County.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Employment Verification**

I agree/understand that in connection to the application process, the YMCA of Broome County or it's designated agent may request information from my past employers, educational institutions, personal references, and any public or private agencies that have issued me either a professional or vocational certification or license. In order to assist the YMCA of Broome County or it's designated agent in obtaining documents and information to confirm my background, if necessary, I hereby:

- Request, authorize and consent to the release of information to the YMCA of Broome County or it's designated agent regarding my previous employment and authorize all current and past employers or agents that they may respond to verbal or written inquiries from the YMCA of Broome County or it's designated agent, regarding any and all information connected with my current or past employment.
- Request, authorize and consent to the YMCA of Broome County or it's designated agent contacting any and all references given by me either verbally or in writing for the purposes of confirming information contained in my application for employment. I specifically request, authorize and consent to the YMCA of Broome County or it's designated agent's, verbal or written inquiries addressed to my references about the information contained in my application, as a well as any inquiries made about any and all employment records and/or personal reference requests.

I further agree to hold harmless, the YMCA of Broome County or it's designated agent or any party contacted to give information in connection with my employment application and employment process.

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Printed Name

Please list any names used in connection with previous employment for use in employment verification:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_