



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

GREATER HOLYOKE YMCA

Application for Employment

Applicants for employment are considered without regard to race, creed, color, religion, sex, sexual orientation, marital status, results of genetic testing, national origin, age, disability, status as a veteran, Vietnam Era Veteran, or being a member of the Reserves or National Guard. Also it is unlawful in Massachusetts to require a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subjected to criminal penalties and civil liabilities.

(PLEASE PRINT)

Date of Application _____

Position(s) Applied for _____

Are you available to work Full Time Part Time Temporary Volunteer

On what date would you be available to work? _____

Referral Source: Advertisement Friend Relative Walk-In
 Employment Agency On-Line Other

Name: _____
LAST FIRST MIDDLE

Address: _____
NUMBER STREET CITY STATE ZIP

Telephone () _____ Social Security No. _____

Are you under 18? Yes No E-Mail Address: _____

If employed and you are under 18, can you furnish a work permit? Yes No

Have you ever been employed here before? Yes No

If yes, give date _____

Have you ever worked for another YMCA Yes No

May we contact your current employer? Yes No

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

Employment History

Start with your present or last job. Include military service assignments and any verified work performed on a volunteer basis. You may exclude organization names which indicate race, creed, color, religion, sex, sexual orientation, marital status, results of genetic testing, national origin, age, disability, status as a veteran, Vietnam Era Veteran, or being a member of the Reserves or National Guard.

Employer	Telephone	Work Performed
Address	City, State, Zip	
	Hourly Rate/Salary	
Job Title	Starting Final	
Supervisor	Dates Employed	
Reason for Leaving	From To	
May we contact this employer for a reference?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Employer	Telephone	Work Performed
Address	City, State, Zip	
	Hourly Rate/Salary	
Job Title	Starting Final	
Supervisor	Dates Employed	
Reason for Leaving	From To	
May we contact this employer for a reference?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Employer	Telephone	Work Performed
Address	City, State, Zip	
	Hourly Rate/Salary	
Job Title	Starting Final	
Supervisor	Dates Employed	
Reason for Leaving	From To	
May we contact this employer for a reference?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Please explain any gaps in your employment history:
What other experience or training have you had that may have prepared you for this position?

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:

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REFERENCES

Please list at least three character references that know you well and can attest to your abilities and suitability for YMCA employment (*one reference must be a family member*).

Name: _____	Relationship: _____	Years Known: _____
Address: _____	City: _____	State: _____ Zip: _____
E-mail: _____	Phone: _____	Alternate #: _____

Name: _____	Relationship: _____	Years Known: _____
Address: _____	City: _____	State: _____ Zip: _____
E-mail: _____	Phone: _____	Alternate #: _____

Name: _____	Relationship: _____	Years Known: _____
Address: _____	City: _____	State: _____ Zip: _____
E-mail: _____	Phone: _____	Alternate #: _____

APPLICANT STATEMENT

It is my understanding that this employment application, or the granting of an oral interview, does not represent a contract of employment or promise of future benefits by this company/organization. **I understand and agree that if hired, my employment will be at-will in nature and may be terminated, with or without cause, at any time, by either my employer or myself. I also understand that this written statement supersedes any and all oral representations made by agents or representatives of this company/organization.**

Initial _____

I certify that the information on this application is true, completed and correct. I hereby authorize the investigation of my past employment, education and activities and I release from liability all persons, companies and corporations supplying such information. I understand that false answers, statements or significant omissions made by me on this form shall be sufficient cause for denial of employment or discharge.

Initial _____

I understand that the YMCA has a zero tolerance standard for abuse and inappropriate behavior by staff members including harassment of any kind.

Initial _____

I certify that I have read, fully understand and accept all terms of the foregoing applicant statement.

Signature of Applicant

Date