

EMPLOYMENT RECORD

All previous employers are considered references unless specific advice to the contrary accompanies this application.

Job title _____ Dates of employment from _____ to _____

Company name and address _____

Supervisor _____ Telephone number _____

Pay Start \$ _____ End \$ _____ Reason for leaving _____

Major responsibilities _____

Job title _____ Dates of employment from _____ to _____

Company name and address _____

Supervisor _____ Telephone number _____

Pay Start \$ _____ End \$ _____ Reason for leaving _____

Major responsibilities _____

Job title _____ Dates of employment from _____ to _____

Company name and address _____

Supervisor _____ Telephone number _____

Pay Start \$ _____ End \$ _____ Reason for leaving _____

Major responsibilities _____

Any past YMCA work? _____ If yes, where? _____

***Complete the section(s) for the position(s) in which you are interested,
and sign your name on the bottom of the last page.***

FITNESS CENTER/CLASS INSTRUCTION

Exercise training experience? Yes _____ No _____ If yes, where? _____

Briefly list some of the types of exercise equipment with which you have had experience? _____

Do you have any Fitness Testing experience? _____ If yes, briefly describe some of the tests you have administered.

Do you have any personal training experience? Yes _____ No _____

Do you have any aerobic/fitness class teaching experience? _____ If yes, what type(s) of classes have you taught?

Do you have any experience with special populations (cardiacs, elderly, diabetics, etc.) Yes _____ No _____

If yes, what types? _____

CPR Certification? Yes _____ No _____ Expiration Date _____

First Aid Certification? Yes _____ No _____ Expiration Date _____

Any other fitness related certification? Yes _____ No _____ If yes, what? _____

FRONT & CONTROL DESK/NIGHT SECURITY

PLEASE ANSWER THE FOLLOWING QUESTIONS

Why are you interested in a part-time job with the YMCA?

What past experience or training would you bring to this position?

How would you handle the following situations? *(Please answer at least one of the following)*

a. A member was told over the telephone that lap swim was to be held at 6 p.m. today. Upon arriving, he has learned that he was given an incorrect time and that lap swim is now over for the day. He is now very angry. What would you do to diffuse the situation?

b. You are taking an incoming phone call for a director who is unavailable at this time. You ask to take a message and the person informs you that she has left many messages and her calls have never been returned. She is angry and reluctant to leave another message. What would you do in this situation?

AQUATIC DEPARTMENT

Applying For: Instructor _____ Lifeguard _____ Full Time _____ Part Time _____

Are you a certified lifeguard? Yes _____ No _____ If yes, where were you certified? _____

Date of certification _____

Pools or beaches at which you served as a lifeguard or instructor

Name of pool or beach	Location	Year	Full or part time
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are you certified in CPR? _____ What is the certification? _____

Are you certified in First Aid? _____

Do you have any experience in working with children? Explain _____

What past experience or training would you bring to this program? _____

DAY CARE

Do you have any child care related certifications? _____ If yes, please list _____

Do you have any experience in working with children? _____

ALL APPLICANTS

I certify that all the statements made by me in this application are true. I understand that should any statement be false, termination of my employment with the YMCA of Greater Bergen County may result. I understand that my employment will be subject to a criminal background check, and I give the YMCA authorization to conduct one.

Applicant's Signature _____ Date _____

Applications are kept on file for three months.