



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YMCA of Greater Bergen County Application for Employment

YMCA of Greater Bergen County, 360 Main Street, Hackensack, NJ 07601 / 201-487-6600 / info@ymcagbc.org

Position(s) being applied for:

We consider each application without regard to age, race, gender, color, religious creed, national origins, sexual orientation, criminal record, mental illness, handicap, disability, marital status or any other legally protected status pursuant to relevant federal, state and local laws. Reasonable accommodations will be made for applicants with disabilities **and qualified new hires.**

Notice to Applicants

The YMCA maintains a "zero tolerance" for child abuse and/or substance abuse.

Criminal background check and other federal or state screenings for child abuse will be conducted.

Screening tests for alcohol and illegal drug use may be required before hiring and during employment.

Please type or print. Application must be completely filled out in order to be considered.

PERSONAL DATA

Name _____

Home Phone _____

Address _____

Cell Phone _____

City _____ State _____ Zip _____

Email Address _____

Previous residence (Address, City, State, Zip): _____

Previous residence (Address, City, State, Zip): _____

Previous residence (Address, City, State, Zip): _____

- Have you previously worked for any YMCA? Yes No If yes, when _____
YMCA Name & Address _____
- Were you ever enrolled in the YMCA Retirement Fund? _____
- Are you 18 years of age or older?
 Yes No If not, you will be required to furnish working papers upon hire.
- Do you have any pending charges or have you ever pled guilty or been convicted of a crime, felony, disorderly persons offense, drunk driving offense or other violation of law? Do not include convictions that have been annulled, expunged or sealed by a court.
 No Yes, detail _____

Answering "yes" to these questions does not constitute an automatic bar to employment but will be considered in relation to the position sought.

EMPLOYMENT AVAILABILITY

What type of position are you applying for: ___ Full time ___ Regular Part-time ___ Seasonal ___ Other

When are you available (check all that apply)? Available start date? _____

___ Mornings ___ Days ___ Evenings ___ Late Evenings ___ Weekends

Any restrictions to work hours? _____

EMPLOYMENT AND VOLUNTEER HISTORY

Provide the following information of your past and current employers or assignments, **starting with the most recent** (use additional sheets if necessary).

Employer _____ Telephone _____ (_____) _____ Address _____	Dates Employed From _____ To _____	Summarize the type of work performed and job responsibilities
Starting job title/Final job title _____	Hourly Rates or Salary Starting \$ _____ per _____	_____
Immediate supervisor and title _____		_____
Reason for leaving _____ _____	Hourly Rates or Salary Final \$ _____ per _____	_____
_____		_____
Employer _____ Telephone _____ (_____) _____ Address _____	Dates Employed From _____ To _____	Summarize the type of work performed and job responsibilities
Starting job title/Final job title _____	Hourly Rates or Salary Starting \$ _____ per _____	_____
Immediate supervisor and title _____		_____
Reason for leaving _____ _____	Hourly Rates or Salary Final \$ _____ per _____	_____
_____		_____
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Immediate supervisor and title _____		_____
Reason for leaving _____ _____	Hourly Rates or Salary Final \$ _____ per _____	_____
_____		_____

NON-EMPLOYMENT RECORD

Include explanation of all lapses in employment on preceding page.

From		To	Reason	
Mo.	Yr.	Mo.	Yr.	
Mo.	Yr.	Mo.	Yr.	
Mo.	Yr.	Mo.	Yr.	
Mo.	Yr.	Mo.	Yr.	

EDUCATION

School Name & Address (high school, college, trade)	Major Course or Degree Program	Diploma/Degree Received

REFERENCES

List at least three Personal/professional references/persons that know you well and can attest to your abilities and suitability for YMCA

Name	Phone Number	Relationship to you	Years Known
1.			
2.			
3.			

List at least two family references/persons that know you well and can attest to your abilities and suitability for YMCA employment .

Name	Phone Number	Relationship to you	Years Known
1.			
2.			

ADDITIONAL INFORMATION

Do you hold current CPR certification? Yes No

Expiration: _____

Do you hold current first aid certification? Yes No

Expiration: _____

Do you hold current lifeguarding certification? Yes No

Expiration: _____

How did you find us? (if applicable)

- Walk-in
- Signs at Center
- Web Page
- Referral
- Advertisement
- Relative
- Employee
- Private Employment Agency
- Other _____

Other relevant certifications held:

Type: _____ Expiration: _____

Type: _____ Expiration: _____

APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with the YMCA is true, complete and correct, and I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the YMCA's service, whenever it is discovered.

Initial _____

I expressly authorize, without reservation, the YMCA, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the YMCA, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations, organizations for furnishing such information about me. I am aware that I have the right to make a written request for disclosure of the nature and scope of any report that may be ordered.

Initial _____

I understand upon offer of employment, the YMCA will conduct a criminal background check prior to and during my employment as well as a child abuse registry check and I am subject to random, accident follow-up, and for cause drug testing, as well as post offer drug screening contingent on employment.

Initial _____

I am not a child molester, abuser or pedophile; and have not been accused of being a molester or abuser.

Initial _____

I understand that the YMCA does not discriminate in hiring or employment on the basis of race, color, veteran's status, religious creed, national origin, sex, ancestry, or age; or on the basis of a handicap not limiting the applicant's ability to perform satisfactorily the job available. The YMCA will give this application every reasonable consideration. However, in accepting it, the YMCA makes no commitment of employment to the applicant.

Initial _____

I understand that this application remains current for only 60 days. At the conclusion of that time, if I have not heard from the YMCA and still wish to be considered for employment, it may be necessary to reapply and fill out a new application. **Employment with the YMCA is employment at will** which means that employees may end their employment at any time, for any reason; and that the employer (the YMCA) may terminate employees at any time for any reason, with or without cause.

Initial _____

I understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard, and

I certify that I have read, fully understand and accept all terms of the foregoing applicant statement. Do not sign until you have read and initialed the above statements

Signature of Applicant

Date

OR

Signature of Parent if applicant is under 18 years of age

Parent's Name (please print): _____

FOR YMCA USE ONLY:

Date Received: _____

Date Contacted: _____

Referred to: _____

Date: _____

Referred to: _____

Date: _____

Notes/Comments: _____