



Jackson YMCA

Application for Employment

127 West Wesley, Jackson, Michigan 49201
517-784-YMCA (9622) fax 517-782-4045

Mission: To put Christian principles into practice through programs that build healthy spirit mind and body for all
"Equal Opportunity Employer"

PLEASE PRINT

PERSONAL

Name _____ Date of Application _____
Last First Middle

Address _____
Number Street City State Zip

Home Phone: _____ Cell Phone: _____ Email Address: _____

Are you 18 or older? Yes No

Do you have a legal right to remain and work in the United States?
(Proof of identity and authorization is required upon employment) Yes No

Have you ever filed an application with the Jackson YMCA before? Yes No
If yes please give dates _____

Have you ever been employed by the Jackson YMCA before? Yes No
If yes please give dates _____ Position _____

Have you ever been convicted of a crime? If yes, explain.
(Other than minor traffic violations) _____ Yes No

Are there any felony charges pending against you? Yes No

EMPLOYMENT DESIRED

Position(s) Desired _____

Availability: Full Time Part Time Seasonal

If part-time, please specify hours and days desired: _____

Do you have any special training, skills, qualifications or other experiences that relate to the position(s)?

Salary desired _____ Date available to start work _____

EXPERIENCE (List current or most recent job first)

May we contact your present employer? Yes No

| | | | |
|------------------|---------------------|-------|------------------------|
| Employer | Dates | | Work Performed: |
| | From | To | |
| Address | | | |
| Job Title | Hourly Rate/Salary | | |
| | Starting | Final | |
| Supervisor | | | |
| Telephone Number | Reason for Leaving: | | |
| Employer | Dates | | Work Performed: |
| | From | To | |
| Address | | | |
| Job Title | Hourly Rate/Salary | | |
| | Starting | Final | |
| Supervisor | | | |
| Telephone Number | Reason for Leaving: | | |
| Employer | Dates | | Work Performed: |
| | From | To | |
| Address | | | |
| Job Title | Hourly Rate/Salary | | |
| | Starting | Final | |
| Supervisor | | | |
| Telephone Number | Reason for Leaving: | | |

Michigan law requires employers to make accommodations to handicapped applicants and employees where the accommodation does not impose an undue hardship on the employer. Handicapped employees and applicants may request an accommodation of their handicap by notifying the Jackson YMCA in writing of the need for accommodation within 182 days of the date the handicapper knows or should know that an accommodation is needed. Failure to properly notify the Jackson YMCA will preclude any claim that the employer failed to accommodate the handicapper.

EDUCATION

For reference checking purposes please indicate any other names under which you worked or obtained your education.

| | Name, City and State Of School | Course of Study | # of Years Completed | Diploma/Degree |
|-----------------------|-----------------------------------|-----------------|-------------------------|----------------|
| High School GED | | | | |
| Vocational/Technical | | | | |
| College/University | | | | |
| Graduate/Professional | | | | |

MILITARY SERVICE RECORD

Have you had any experience in the Armed Forces of the United States or in a State National Guard?

Yes No if yes, which branch _____ Dates of Services _____

REFERENCES (DO NOT INCLUDE RELATIVES)

| | Name | Phone | Relationship to |
|----|------|-------|-----------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |

List any friends or relatives working for the YMCA _____

Tell us briefly about yourself – your ambitions, qualifications, and reasons for seeking employment with the YMCA:

TO BE COMPLETED BY APPLICANTS FOR PROGRAM/AQUATIC POSITIONS

(Must submit originals upon hire)

| Name of Certification | Issuing Organization | Type | Expiration |
|----------------------------------|----------------------|--------|------------|
| First Aid | | | |
| CPR | | | |
| WSI | | | |
| YSL | | | |
| Lifeguard | | | |
| Fitness | | | |
| Other Certifications (specify) | | | Dates |
| No. of Child Development Credits | | School | |

Note: At the time of employment a criminal record check will be required.

FOR JOBS REQUIRING DRIVING

Do you have a valid driver's license in this state? Yes No

Do you have a current CDL? Yes No

Are you over 21? Yes No

FOR JOBS REQUIRING COMPUTER / OFFICE SKILLS

Check Computer Skills

Fax PC MS Office Multiple Line Phones Filing

Other Skills: _____

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 Jackson YMCA may result. I hereby waive written notice from my former Employer who divulges a disciplinary report, letter of reprimand, or other disciplinary action to the Jackson YMCA.

I understand that if I am offered a job with the YMCA, I will be an at-will employee and my employment could be terminated with or without just cause at any time at the option of either the YMCA or myself. I understand that no person other than the CEO of the YMCA has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing, unless it is in writing and signed by both CEO of the YMCA and myself.

Date _____

Applicant's Signature _____

Supplement Questions

Do you have any customer service experience? Yes No

Please describe _____

If you were able to work with a specific age group what would it be? Check all that apply

Infants Grade School Middle School High School Adults Seniors

Describe any experience you have working with children (work, volunteer, family)

Do you have any experience teaching or training others? Yes No

Are you multi lingual? Yes No if yes what other languages do you speak?

Do you have any experience teaching or training others? Yes No

Any specific sports or fitness knowledge you possess? List any that apply.

Please list and describe _____

Are you willing to become a lifeguard? Yes No

Can you swim 500 yards continuously within 20 minutes? Yes No

Do you have a problem sitting for long periods of time? Yes No

Are you able to stand for long periods of time? Yes No

Do you have reliable transportation ? Yes No

Continued on back.....

All areas of this application must be completed in order to be considered for employment.

All applicants must submit **three** letters of reference with the completed application. May not be from a relative.

All applications will be reviewed by the Human Resource Director. If you are a top candidate for an open position you will be called and an interview will be scheduled for you. Please update the Jackson YMCA of any changes to your information including but not limited to phone and email address.

Thank you for applying for employment at the Jackson YMCA,

Human Resource

Here are just some of the areas we hire for:

Afterschool Adventure, Referees, Child Watch, Rock Wall, Lifeguards, Swim Instructors, Wellness Attendants, Wellness Instructors, Customer Service Representatives, Cleaning, Maintenance, Bus Drivers, Personal Trainers, Gymnastics Instructors, Sports and Cheerleading Coaches, and General Instructors