

# Greater Peoria Family YMCA Employment Application



Name:

Date of Application:

Position:

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

**Personal Information**

Name: \_\_\_\_\_  
Last First Middle SSN (Optional)

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

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ email address \_\_\_\_\_

Are you under 18 years of age? Yes No

If you are under 18, and it is required, can you furnish a work permit? Yes No

If no, please explain: \_\_\_\_\_

Have you ever been employed at this YMCA before? Yes No

If Yes:

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Position: \_\_\_\_\_

Are you legally eligible for employment in this country? Yes No

Date available for work: \_\_\_\_\_ What is your desired salary range? \_\_\_\_\_

Type of employment desired? Full-Time Part-Time Temporary Seasonal Co-op

Are you able to meet the attendance requirements of the position? Yes No

Driver's license number if driving is an essential job function: \_\_\_\_\_

□

□

□

Initials \_\_\_\_\_

**Employment History**

Employer: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Starting / Final Job Title: \_\_\_\_\_

Supervisor Name and Title: \_\_\_\_\_

Summarize the Nature of Work Performed and Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

May we contact this employer for references: Yes No

Reason for Leaving: \_\_\_\_\_

Salary (indicate hourly rate or salary) : \_\_\_\_\_  
Start End

Employer: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Starting / Final Job Title: \_\_\_\_\_

Supervisor Name and Title: \_\_\_\_\_

Summarize the Nature of Work Performed and Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

May we contact this employer for references: Yes No

Reason for Leaving: \_\_\_\_\_

Salary (indicate hourly rate or salary) : \_\_\_\_\_  
Start End

Initials \_\_\_\_\_

**Employment History (continued)**

Employer: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Starting / Final Job Title: \_\_\_\_\_

Supervisor Name and Title: \_\_\_\_\_

Summarize the Nature of Work Performed and Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

May we contact this employer for references: Yes No

Reason for Leaving: \_\_\_\_\_

Salary (indicate hourly rate or salary) : \_\_\_\_\_  
Start End

Employer: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Starting / Final Job Title: \_\_\_\_\_

Supervisor Name and Title: \_\_\_\_\_

Summarize the Nature of Work Performed and Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

May we contact this employer for references: Yes No

Reason for Leaving: \_\_\_\_\_

Salary (indicate hourly rate or salary) : \_\_\_\_\_  
Start End

Initials \_\_\_\_\_

## Skills and Qualifications

Summarize any training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

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## Educational Background

High School: \_\_\_\_\_ Number of Years Completed: \_\_\_\_  
Name and Location

Did You Graduate: Yes    No    Course of Study: \_\_\_\_\_

College / Other: \_\_\_\_\_ Number of Years Completed: \_\_\_\_  
Name and Location

Did You Graduate: Yes    No    Course of Study: \_\_\_\_\_

Degree Awarded: \_\_\_\_\_

College / Other: \_\_\_\_\_ Number of Years Completed: \_\_\_\_  
Name and Location

Did You Graduate: Yes    No    Course of Study: \_\_\_\_\_

Degree Awarded: \_\_\_\_\_

Graduate School: \_\_\_\_\_ Number of Years Completed: \_\_\_\_  
Name and Location

Did You Graduate: Yes    No    Course of Study: \_\_\_\_\_

Degree Awarded: \_\_\_\_\_

Initials \_\_\_\_\_



Statement of Job Applicant

In the Greater Peoria Family YMCA's efforts to attract the highest quality staff, I have been advised that as a part of the application process for employment an extensive inquiry will be made concerning my prior employment, activities, character and health. This inquiry will include criminal history information and information in my background related to child abuse. I fully consent to and authorize all such inquiries. I will provide the requested information for the sole purpose of obtaining a conviction only criminal history file search. I understand that my continued employment is contingent upon a clean criminal history background check and a physician's statement showing me to be in good health.

I authorize the YMCA to request my employment record from any former employer(s). I further understand that inquiries may be made concerning my background, experience and prior employment. I waive any right to claim that any request or investigation is an invasion of my privacy because it is made with my consent and it is in my interest that I am considered for employment. I also release the YMCA from any liability re: sharing with third parties any child abuse information gathered in this background check or observed during my employment with the YMCA.

In the event that I am employed by the Greater Peoria Family YMCA, I will comply with all policies set forth in the personnel manual and with other policies established from time to time by the organization. I also understand that if hired as a YMCA employee or volunteer, I am not allowed to fraternize with YMCA youth members or participants outside of YMCA programs, including, but not limited to, baby-sitting or inviting children to my home.

I understand that the YMCA will take any allegations or suspicions of child abuse seriously and will report such allegations to the police and state agencies for investigation.

I understand and agree that if I am employed by the Greater Peoria Family YMCA, there is no contract period for employment and my employment will be solely "employment at will," giving either me or the YMCA the right to terminate my employment at any time without liability or obligation except for my regular pay through the date of my termination.

I certify that all statements made by me on this application are true to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand and agree that any misrepresentation or omission of facts would exclude my being considered for employment. Any misrepresentation or omission of facts discovered after employment may be cause for termination of employment with the YMCA.

I hereby acknowledge that I have read and understand the above statement and that I voluntarily sign this application.

Date: \_\_\_\_\_

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature