



EMPLOYMENT APPLICATION

YMCA OF THE CENTRAL BAY AREA

2111 Martin Luther King Jr. Way
Berkeley, CA 94704
P 510 549-4515

General Information

Date _____

Name

_____ Last First Middle

Phone # _____ E-Mail _____

Present Address

_____ Street City State Zip

Permanent Address

(If different from present address) _____ Street City State Zip

How did you hear of this position? _____ Referred by _____

Are you authorized to work in the United States? Yes No

Are you at least 18 years old? Yes No Are you at least 15 years old? Yes No
If you are under age 18, you may be required to provide a work permit prior to working.

Position Desired _____ Date Available _____

Branch: Albany Downtown ECS Association Office Irvin Deutscher Family

Full Time (30-40 hrs per week) Part Time (0-29 hrs per week) Temporary:

If applying for temporary work, what period of time will you be available? From: _____ To: _____

Please indicate the hours you are available to work during both days and evenings.
(facility hours vary between 5:00a.m. - 10:30p.m.):

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Previous YMCA Experience

If you have worked for the YMCA before, state location, dates and position: _____

Have you ever applied to the YMCA before? If yes, where? _____

Do you have any relatives now employed by the YMCA of the Central Bay Area? Yes No

If yes, identify by name(s), relationship and position: _____

Employment History

List below all present and past employment starting with your most recent employer (last five years is sufficient). Account for all periods of unemployment. If you are completing this section by attaching a resume, the resume must include all of the information listed below.

Name of Employer _____ Phone (____) _____

Type of Business _____ Supervisor's Name _____

Street Address _____ City _____ State _____ Zip _____

Dates of Employment: from _____ to _____ Hourly/Salary: _____

Position and Duties _____

Reason for Leaving _____

May we contact for a reference? Yes No

Name of Employer _____ Phone (____) _____

Type of Business _____ Supervisor's Name _____

Street Address _____ City _____ State _____ Zip _____

Dates of Employment: from _____ to _____ Hourly/Salary: _____

Position and Duties _____

Reason for Leaving _____

May we contact for a reference? Yes No

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Dates of Employment: from _____ to _____ Hourly/Salary: _____

Position and Duties _____

Reason for Leaving _____

May we contact for a reference? Yes No

Education History

Education	School Name/Location	Major or Area of Study	Degree
High School			
College/University			
College/University			
Other Training or Education			

Education and Training

Identify all certifications which you currently hold:

Name of certification _____

Issuing party/agency _____

Have your certifications ever lapsed? _____

If yes, state reason for lapse/revocation/suspension _____

_____ Date of reinstatement _____

Foreign language _____ Speak Write Understand

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In addition to your work history and educational experience, what other experiences, skills or qualification do you have that would qualify you for this position?

Military Service

Are you currently in the military reserves or National Guard? Yes No

Have you served in the Armed Forces? Yes No If so, in what branch? _____

References

List three persons not related to you who have knowledge of your work performance within the last three years.

First Name _____ Last Name _____ Phone (____) _____

Street Address _____ City _____ State _____ Zip _____

Occupation _____ No. of Years Acquainted _____

First Name _____ Last Name _____ Phone (____) _____

Street Address _____ City _____ State _____ Zip _____

Occupation _____ No. of Years Acquainted _____

First Name _____ Last Name _____ Phone (____) _____

Street Address _____ City _____ State _____ Zip _____

Occupation _____ No. of Years Acquainted _____

Please Read Carefully, Initial Each Paragraph and Sign Below

____ I hereby certify that I have not knowingly withheld any information that might adversely affect
Initials my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

____ Should a search of public records (including records documenting an arrest, indictment,
Initials conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the YMCA of the Central Bay Area, I am entitled to copies of any such public records obtained by the YMCA unless I mark the "Check Box" below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

I waive receipt of a copy of any public record described in the paragraph above.

Personal Information

____ Have you ever pleaded guilty to, or been convicted of, a felony or misdemeanor? Yes No
Initials If yes, state nature of the crime(s), give dates, where convicted and disposition of the case.

No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.

____ Are you able to perform the essential functions of the job for which you are applying, either
Initials with or without reasonable accommodation? Yes No

If no, describe the functions that cannot be performed.

At Will Employment

____ I understand that nothing contained in the application, or conveyed during any
Initials interview, or granted during my employment, if hired, is intended to create an employment contract between me and the YMCA of the Central Bay Area. In addition, I understand and agree that if I am hired my employment is for no definite or determinable period and regardless of the day of payment of my wages or salary, may be terminated at any time, with or without prior notice, at the option of either myself or the YMCA of the Central Bay Area. This provision may be modified only in writing, signed by the President of the YMCA of the Central Bay Area.

Date _____ Applicant's Signature _____