Thank you for your interest in applying for employment with the Elkins-Randolph County YMCA. We are an equal opportunity employer. Applicants for all job openings are welcome and will be considered without regard to race, color, religion, national origin, sex, age, sexual orientation, physical or mental disability, or any other basis protected by state, federal or local law. It is the intent of the YMCA to comply with all applicable federal, state, and local legislation concerning equal opportunity in employment.

To help us learn about your experience, abilities, and interests, please complete this application for employment as thoroughly as possible.

PERSONAL INFORMATION

NAME: Please PRINT or TYPE	Telephone No.
ADDRESS: Street Number and Name, City, State, Zip Code	E-mail:
Can you, after employment, submit verification of your legal right to work in the Un	ited States?
YES NO	
Are you over 18? If hired, do you have a reliable means of transporta	ation to get to work?
YES NO YES NO	
Have you ever been convicted of a felony, or for child abuse or sex-related crimes?	
which occurred more than two years prior to the date of this application. A convicti YES NO If yes, please explain:	on will not necessarily disquality you.)
Please refer to the job description for the position to which you are applying. Are yo	ou able to perform all of the tacks with or without an
accommodation? YES NO	ou able to perform an or the tasks with or without an
Please describe below which tasks, if any, you will need an accommodation to perfowill need:	orm, and explain what type of accommodation you
Notice to All Applicants: The YMCA enforces its policies and practi	ces to provent child abuse. Allegations or
suspicions of child abuse are taken very seriously at the YMCA and	•
for investigation. We have abuse reporting procedures, we have an	
programs, and we have a code of conduct for staff. We minimize opp	•
screen carefully to prevent abusers from being hired and we provide	
sereell carefully to prevent abasers from being fined and the provid-	e clina abase prevention training to stain.

EMPLOYMENT DESIRED

POSITION desired:					Date	Date Available			# Hours Preferred	
List available days/hours:					I			I		
Sunday Monda	av	Tuesday	Wedi	nesday	Thursda	v	Frid	av	Saturday	
,		,		<u> </u>		•		<i>'</i>	,	
Are you presently employed? YES NO If yes, may we contact your present employer? YES NO										
Have you ever applied at the YM	NCA befo	re?		Have yo	u ever been e	mploye	ed by a YM	CA before?		
YES NO If yes, when? YES NO If yes, when?										
How did you hear about this op	enina?			1						
Advertisement Employee Referral Name of Employee Other										
EDUCATION AND TRAINING										
SCHOOL NAME & LOCATION				Years A	ttended	Gr	aduate?	Degree/	Major/	
				From	То	(Y	es/No)	Certificate	_	
High Cahool									+	
High School										
College/University										
College/University										
College/Offiversity										
Highest Degree Earned										
(Circle one number only): 1. Hig	h School	2. Associate	3. Bachel	or 4. Ma	ster 5. Doo	torate	:			
Additional Education, Vocational and/or Professional Information such as special areas of research or study, seminars, etc. Please attach any written resume or other summary of information that is relevant to the position for which you are applying. If familiarity with a foreign language is listed on the job description, please describe your foreign language skills below.										
Professional memberships, certificates or licenses held. (Exclude those indicating race, color, religion, sex, sexual orientation, national origin, age, physical or mental disability or labor organization affiliations.)										
U.S. MILITARY SERVICE DATA										
Branch:										
List Special Training or Skills:										

EMPLOYMENT DATA

PLEASE LIST IN ORDER OF MOST RECENT EMPLOYMENT FIRST				
Company Name	Phone No.		Dates of Employment From (Mo/Yr) to (Mo/Yr)	
Address (Include Street, City, State, Zip C	ode)			
Job Title-Start	Job Title	Base Ra Start	te of Pay Final	
Supervisor (Name & Title)				
Description of Job Duties				
Company Name	Phone No.		mployment r) to (Mo/Yr)	
Address (Include Street, City, State, Zip C				
Job Title-Start	Job Title	Base Ra Start	te of Pay Final	
Supervisor (Name & Title)				
Description of Job Duties				
Company Name Phone No.			mployment r) to (Mo/Yr)	
Address (Include Street, City, State, Zip C	ode)			
Job Title-Start	Job Title	Base Ra Start	te of Pay Final	
Supervisor (Name & Title)				
Description of Job Duties				

REFERENCE DATA

PROFESSIONAL/WORK REFERENCES WE MAY CONTACT

Name	Address	Phone	
PRE-	-EMPLOYMENT CERTIFI	CATION	
I understand that this application is is not obligated to retain or consider	•		: YMCA
I understand that falsification, misre removal of my application from conssecure information about my experie and for those parties to provide authliability arising there from including	ideration. I authorize the E ence with former employers norization concerning my e	lkins–Randolph County YMCA to s, education institutions and ager xperience releasing all parties fro	ncies,
My signature below certifies that I have knowledge and belief, the information			y
SIGNATURE OF APPLICANT		DATE	
SIGNATURE OF PARENT (IF APPLICA	NT IS UNDER 18)	DATE	