



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Application for Employment

YMCA of Southwestern Indiana
222 NW Sixth Street
Evansville, IN 47708

This application will not be valid if any questions remain unanswered.

Personal: Please Print or Type Your Answers

Name: _____
Last First Middle Prefer to be called

Social Security Number: _____

Have you ever been known by any other name: _____ No _____ Yes If yes, please list: _____

Permanent Address: _____

Street

City

State

Zip

(Area code) Phone Number

Email address

General Employment Information

What position(s) are you applying for? _____

Are you a United States Citizen? _____ Yes _____ No

Are you 18 or older? _____ Yes _____ No

Drivers License: State _____ Number _____ Expiration _____

Have you been convicted of a felony in the last 5 years, excluding traffic cases? _____ Yes _____ No If 'Yes', please attach an explanation to this application. (A conviction record will not necessarily bar you from employment with the YMCA. The age and time of any conviction, the seriousness and nature of the violation, and rehabilitation will be taken into account by the YMCA.)

What is the earliest date you can begin? _____

Have you filed an application with the YMCA before? _No _____ Yes-when? _____

Have you ever been employed with the YMCA before? _____ No _____ Yes-when? _____

Expected Pay? _____

Apart from absence for religious observance, are you available for full-time work? _____

If not, what hours can you work? _____

Other special training or skills (languages, Machine operation, etc.) _____

Any membership in professional or civic organization (exclude those which may disclose your race, religion or national origin): _____

Education

Circle year or grade you will have completed by June:

11 12
High School1 2 3 4
College1 2 MA Ph.D.
Post Graduate

High School attending/attended: _____

College(s) attended: _____

Major: _____

Employment References

Employer: _____ Title/Position: _____

Address: _____ Phone Number: _____

City/State/Zip: _____ Supervisor: _____

Responsibilities/Work Performed: _____

Employed Dates: ____ / ____ until ____ / ____ Reason for leaving: _____

Employer: _____ Title/Position: _____

Address: _____ Phone Number: _____

City/State/Zip: _____ Supervisor: _____

Responsibilities/Work Performed: _____

Employed Dates: ____ / ____ until ____ / ____ Reason for leaving: _____

Employer: _____ Title/Position: _____

Address: _____ Phone Number: _____

City/State/Zip: _____ Supervisor: _____

Responsibilities/Work Performed: _____

Employed Dates: ____ / ____ until ____ / ____ Reason for leaving: _____

We may contact the employers listed unless you indicate those you do not want us to contact.

Do Not Contact

Employers Number(s): _____

Reason(s): _____

Signature

The information provided in this application for employment is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

If you decide to engage an investigative consumer-reporting agency to report on my credit and personal history, I authorize you to do so. If a report is obtained you must provide, at my request, the name of the agency so I may obtain from them the nature and substance of the information contained in the report.

Signature: _____ Date: _____

Our Mission: The YMCA of Southwestern Indiana Inc. following the example of Jesus Christ, responds to community needs by serving all people, especially youth, through relationships and activities that promote healthy spirit, mind, and body.