



Parkview Huntington Family YMCA Application for Employment

Your Contact Information

First Name

Last Name

Phone

Address:

City

State

Zip Code

E-mail Address

Social Security #

Position Applying For?

Are you 18 years of age or older?
(Work permit required for minors)

Yes

No

Date you are available to start?

Can you perform the essential functions of
the job for which you are applying, with or
without reasonable accommodation?

Yes

No

If no, please explain

Have you ever been convicted of a felony?

Yes

No

If yes, please explain

EDUCATION

High School

College or Vocational School

H.S. Diploma or GED?

Major/Minor/Area of Study

Degree?

Yes

No

Please list any relevant certifications, volunteer activities, and any other experiences that strengthen your ability to perform the essential functions of the job.

EMPLOYMENT HISTORY (Most recent first)

Employer

Phone

City

State

Dates employed

to

Position

Reason for leaving

Immediate
Supervisor

May we contact this
employer?

Yes

No

.....
Employer

Phone

City

State

Dates employed

to

Position

Reason for leaving

Immediate
Supervisor

May we contact this
employer?

Yes

No

Application Acknowledgement and Authorization

Please read all statements and sign below:

I authorize both the YMCA and persons listed (references, schools, current (unless noted) and former employers and any others with whom you desire to check) to communicate with regard to any relevant information that may be required to reach an employment decision. I agree to hold such persons harmless with respect to any information they may supply. I understand and agree that any offer of employment is contingent upon successful completion of all background check processes, including a criminal history background check.

I certify that all information provided by me in this application is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation, or omission of any facts in this application or any other document submitted in connection with YMCA employment will result in denial of employment or termination of employment regardless of the timing or circumstances of discovery.

If I am employed by the YMCA I understand my employment can be terminated, with or without cause and with or without notice, at any time at the option of the YMCA or myself.

I understand that all offers of employment are conditional upon my ability to provide appropriate documents regarding my identity and legal right to work in the United States.

Digital Signature:

Date:

To submit online application:

1. Complete all lines
2. Save as "yournameapplication.pdf"
3. Email file to todd.latta@huntingtony.org