



Application for Employment
 YMCA of the Greater Tri-Valley
 301 W. Bloomfield St
 Rome, NY 13440

Branch:	_____ Rome
	_____ Oneida
	_____ New Hartford SACC
Dept:	_____

Please PRINT clearly and complete all sections

Personal Information

Name: _____
Last First Middle

Social Security No. _____ *

*You are not required to disclose your social security number before being hired – be advised that disclosure is optional.

Address: _____
Street

City State Zip Code

Telephone No. _____

Email: _____

Cell Phone No.: _____

Position(s) applying for: _____

Expected Rate of Pay \$ _____ / hour

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

Have you ever been employed by a YMCA before? [] Yes [] No

YMCA Name and Address: _____

If yes, give dates, position(s) _____

Date available for work: _____

Are you over the age of 18? [] Yes [] No

Type of employment desired: [] Full-time [] Part-time [] Seasonal (including camps) [] Temporary

Some YMCA full-time and part-time positions may require that you work overtime. Would you be willing and able to work overtime as necessary? [] Yes [] No

Are you currently employed? [] Yes [] No May we contact your present employer? [] Yes [] No

Have you ever been convicted of a felony? [] Yes [] No

If yes, please provide date(s) and details _____

(Answering "yes" to this question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.)

Education/Training

	Name and Address of School	Course of Study	Circle Last Year Completed				Did You Graduate?	List Diploma, Degree or Subjects Studied
			1	2	3	4		
High School			1	2	3	4	[] Yes [] No	
College			1	2	3	4	[] Yes [] No	

Other (specify)			1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
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Certifications/Licenses/Special Skills

List any **current** certifications or licenses that may qualify you as being able to perform job-related functions in the position for which you are applying.

- | | |
|---|--|
| <input type="checkbox"/> Adult/Child CPR/AED (Red Cross) | <input type="checkbox"/> Lifeguard Training (Red Cross) |
| <input type="checkbox"/> CPR for the Professional Rescuer (Red Cross) | <input type="checkbox"/> Water Safety Instructor (Red Cross) |
| <input type="checkbox"/> Standard First Aid (Red Cross) | <input type="checkbox"/> Instructor Candidate Training (Red Cross) |
| <input type="checkbox"/> Community First Aid (Red Cross) | <input type="checkbox"/> Lifeguard Training (YMCA) |
| <input type="checkbox"/> Heart Saver (Heart Association) | <input type="checkbox"/> Swimming Coach Training (YMCA) |
| <input type="checkbox"/> Babysitting Certification (Red Cross) | <input type="checkbox"/> Waterfront Lifeguard Module (Red Cross) |
| <input type="checkbox"/> Commercial Driver's License (NYS) | <input type="checkbox"/> Other: _____ |

YMCA of USA and/or Other Job Related Certifications

List any **YMCA** or other job related certifications that you consider relevant to your ability to perform this job?

Affiliations

List any **professional or trade groups or organizations** that you belong to that you consider relevant to your ability to perform this job?

Employment History (Resumes may be attached)

Provide the following information of your past four (4) employers, assignments, or volunteer activities, starting with the most recent. Exclude groups that indicate race, color, religion, sex, age, disability, sexual orientation or national origin.

From	To	Employer Name	Telephone #
Starting/Ending Job Title		Employer Address	
Immediate Supervisor Name & Title		Summarize the nature of work performed and Job Responsibilities	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			
Reason for Leaving		Hourly Rate/Salary Start \$ _____ per _____ Final \$ _____ per _____	

Employment History (Continued)

From	To	Employer Name	Telephone #
Starting/Ending Job Title		Employer Address	
Immediate Supervisor Name & Title		Summarize the nature of work performed and Job Responsibilities	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			
Reason for Leaving		Hourly Rate/Salary Start \$ _____ per _____ Final \$ _____ per _____	

From	To	Employer Name	Telephone #
Starting/Ending Job Title		Employer Address	
Immediate Supervisor Name & Title		Summarize the nature of work performed and Job Responsibilities	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			
Reason for Leaving		Hourly Rate/Salary Start \$ _____ per _____ Final \$ _____ per _____	

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Immediate Supervisor Name & Title		Summarize the nature of work performed and Job Responsibilities	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			
Reason for Leaving		Hourly Rate/Salary Start \$ _____ per _____ Final \$ _____ per _____	

Work-Related and Personal References

Please include two work references (supervisors, not co-workers) and one personal reference (not a relative):

Reference #1:

Name: _____ Daytime Telephone No. _____

Address: _____ Relationship/Job Title: _____

Reference #2:

Name: _____ Daytime Telephone No. _____

Address: _____ Relationship/Job Title: _____

Work-Related and Personal References (continued):

Reference #3:

Name: _____ Daytime Telephone No. _____

Address: _____ Relationship/Job Title: _____

Applicant Statement

I certify that all information provided by me on this application is true and complete to the best of my knowledge and that I have withheld nothing that, if disclosed, would alter the integrity of this application.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, résumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees, or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations, or organizations for furnishing such information about me.

I agree that the YMCA of the Greater Tri-valley and my previous employers will not be held liable in any respect if a job offer is not extended, or is withdrawn, or employment is terminated because of false statements, omissions, or answers made by myself on this application. In the event of any employment with this company, I will comply with all rules and regulations as set by the YMCA of the Greater Tri-Valley in any communication distributed to the employees.

In compliance with the Immigration Reform and Control Act of 1986 (and its amendments) I understand that I am required to provide approved documentation to the company that verifies my right to work in the United States at my YMCA Human Resources New Employee Orientation Session. I have received from the YMCA a list of the approved documents that are required.

If I am hired, I understand that my employment is at will, and I am free to resign at any time, with or without cause, and the employer reserves the same right to terminate my employment at any time, with or without cause, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral, or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the YMCA of the Greater Tri-Valley Chief Executive Officer.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

DO NOT SIGN UNTIL YOU HAVE READ THE APPLICANT STATEMENT!

I certify that I have read, fully understand and accept all the terms of the foregoing Applicant Statement.

Signature of Applicant _____ Date _____

Immigration Reform and Control Act Requirement

In compliance with the Immigration Reform and Control Act of 1986 (and amendments), you are required to provide approved documentation that verifies your right to work in the United States prior to your employment with this company. Please be prepared to provide us with the following documentation in the event you are offered and accept employment with the YMCA (documents will be needed for your Human Resources YMCA New Employee Orientation.)

Newly hired employees must complete and sign Section 1 of the USCIS Form I-9 **no later than the first day of employment.** Here is the newest list of acceptable documents (revised 10/31/2014):

LISTS OF ACCEPTABLE DOCUMENTS

All documents must be UNEXPIRED

Employees may present one selection from List A
or a combination of one selection from List B and one selection from List C.

LIST A Documents that Establish Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity	AND LIST C Documents that Establish Employment Authorization
1. U.S. Passport or U.S. Passport Card		1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	1. A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	2. Certification of Birth Abroad issued by the Department of State (Form FS-545)
3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa		3. School ID card with a photograph	3. Certification of Report of Birth issued by the Department of State (Form DS-1350)
4. Employment Authorization Document that contains a photograph (Form I-766)		4. Voter's registration card	4. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status: a. Foreign passport; and b. Form I-94 or Form I-94A that has the following: (1) The same name as the passport; and (2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.		5. U.S. Military card or draft record	5. Native American tribal document
6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI		6. Military dependent's ID card	6. U.S. Citizen ID Card (Form I-197)
		7. U.S. Coast Guard Merchant Mariner Card	7. Identification Card for Use of Resident Citizen in the United States (Form I-179)
		8. Native American tribal document	8. Employment authorization document issued by the Department of Homeland Security
		9. Driver's license issued by a Canadian government authority	
		For persons under age 18 who are unable to present a document listed above:	
		10. School record or report card	
		11. Clinic, doctor, or hospital record	
		12. Day-care or nursery school record	



Thank you for your interest in employment with
the YMCA of the Greater Tri-Valley where we advocate

**FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

Our Mission

To put Christian principles into practice through programs that
build a healthy spirit, mind, and body for all.

Vision Statement

To be the place that people think of first and come to for excellence in prevention and
development programs for strong kids, strong families, and strong communities.

Rome Family YMCA

301 W. Bloomfield St.
Rome, NY 13440
(315) 336-3500

Oneida Family YMCA

701 Seneca St.
Oneida, NY 13421
(315) 363-7788

New Hartford SACC

St. Stephan's Episcopal Church
25 Oxford Road
New Hartford, NY 13413
315 797-4787

Affirmative Action/Equal Employment Opportunity Policy Statement

We are an Equal Opportunity Employer. It is the policy of the YMCA of the Greater Tri-Valley to provide for and promote equal employment opportunity in employment compensation and other terms and conditions of employment without discrimination based on age, race, creed, color, national origin, gender, sexual orientation, disability, marital status, Vietnam Era Veteran status, genetic predisposition, and any other characteristic protected by Federal, State or Local law. Consistent with the Americans with Disability Act, applicants may request accommodation needed to participate in the application process.

The YMCA of the Greater Tri-Valley is committed to assuring equal employment opportunity and equal access to services, programs and activities for individuals with disabilities. The YMCA complies with the American with Disabilities Act and the New York Human Rights Law regarding disabilities and will, therefore, afford any reasonable accommodations to qualified applicants and employees with known disabilities as required by law. It is the policy of the YMCA of the Greater Tri-Valley to provide reasonable accommodation to a qualified individual with a disability to enable such individual to perform the essential functions of a position for which he/she is applying or in which he/she is employed.

This policy applies to all employment practices and actions. It includes, but is not limited to, recruitment, job application process, examination and testing, hiring, training, disciplinary actions, rate of pay or other compensation, advancement, classification, transfer, reassignment and promotions. The YMCA's designated person for issues concerning Equal Employment Opportunity is its Human Resources Division personnel.