

FOR YOUTH DEVELOPMENT FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

EMPLOYMENT APPLICATION FOND DU LAC FAMILY YMCA

90 W. 2nd Street Fond du Lac, WI, 54935 P 920.921.3330 | F 920.921.3376

Wea	are an	Equal	Opportunity	/ Employer	•	The YMCA	Welcomes	a Diverse	Workforce
	are an	Lquui	opportunity				Welcomes	a biveibe	

Please print legibly in ink.	You must complete the entire application.	Date:	/ /
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APPLICANT INFORMATION							
Name (first, middle, last)	Daytime Telephone ()						
Address (street, city, state, zip code)	Evening Telephone ()						
Please list any other names under which you have worked or attended school.	Mobile Telephone ()						
Are you at least 18 years old? \Box Yes \Box No Date of birth (if under 18)// If not, your employment will be subject to verification that you meet state/federal minimum age requirements for the type of work applying for and have obtained a valid work permit.	Email address						
Have you ever been convicted or have charges pending of a crime (felony or misdemeanor)? If yes, explain 1) nature of the crime 2) date of conviction, and 3) state in which convicted. Convictions are not an automatic bar to employment. However, failure to provide complete and accurate information relating to criminal convictions will result in immediate termination. We conduct criminal record checks on all employees. Employment is contingent upon the results of the criminal record check. If you are unsure how to complete this information, please contact the Human Resources Department.							
Please list your addresses in the past five years:							
POSITION APPLYING FOR							
Please check all departments you would like to be considered for. Indicate 1 st , 2 nd , 3 rd ch	oice if applicable.						
Aquatics							
	itenance						
	chool Enrichment						
🗆 Sports 🗅 Wellness Center 🔹 🗅 Other							
Specific position(s) applying for							
Availability: Please indicate all that apply:							
Part- time Full-time Year-round Summer School Year							
When can you start?/ Are you interested in volunteer work? U Yes U No							

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

Have you been paid to work for the How did you learn of this opening? (l No If	⁼ yes, whe	en?		
Community Agency	Employee Referral	Employment Agency				
Government Agency	Job Fair		Newspaper			
School/College	Social Media Ad		🛛 Walk-	- in		
Wisconsin Job Center	□ YMCA Job Opportunities	Posting	🛛 Other	r		
EDUCATIONAL BACKGROUND						
Type of School Nar	me and Address	Check La Compl		Graduated (Y/N)	Diploma, Degree, Course of Study	
High School		8, 9, 10	, 11, 12			
College		1, 2, 3	, 4, 5			
Post Graduate		1, 2, 3	, 4, 5			
Business/Technical		Months Attended	:			
WORK HISTORY (paid and unpaid)						
Are you currently employed? 🛛 Yes	No If yes, list your w	vork schec	lule			
May we contact your current and past	employer for reference pur	poses?	🛛 Yes	🗆 No		
Name of Employer		Γ				
Address		Telephone Number ()				
Name of Immediate Supervisor						
Job Title		Employment Dates (month/year)				
Description of Duties	From To					
Salary (start) Sala	ary (end)					
Name of Employer						
Address		Telephon	e Numbe	r ()		
Name of Immediate Supervisor		1				
Job Title		Employm	ent Dates	s (month/year))	
Description of Duties		From		То		
Salary (start) Sala	ary (end)					

Name of Employer	Reason for Leaving			
Address	Telephone Number ()			
Name of Immediate Supervisor				
Job Title	Employment Dates (month/year)			
	From To			
Description of Duties				
Salary (start) Salary (end)				
Name of Employer	Reason for Leaving			
Address	Telephone Number ()			
Name of Immediate Supervisor				
Job Title	Employment Dates (month/year)			
Description of Duties	From To			
Salary (start) Salary (end)				
REFERENCES				
(List individuals familiar with your job qualifications. Please include	e one family member/relative.)			
Name	How long known?			
	Daytime Telephone ()			
Address	Evening Telephone ()			
Relationship				
Name	How long known?			
	Daytime Telephone ()			
Address	Evening Telephone ()			
Relationship				
Name	How long known?			
	Daytime Telephone ()			
Address	Evening Telephone ()			
Relationship	·			



OTHER QUALIFYING FACTORS								
Certifications: (Proof of certification may be required prior to employment)						ved Exp	iration Date	
If relevant, please describe word processing speed, software knowledge and office equipment experience.								
Briefly describe what makes you feel qualified to fill the desired position.								
AVAILABILITY	AVAILABILITY (List general days and times of your availability for work)							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	
Morning								
Afternoon								
Evening								

Fond du Lac Family YMCA Code of Ethics

Below are statements of our Code of Ethics we expect all staff to demonstrate and follow. Please read the statements carefully before signing.

- Our staff will exhibit the highest ethical best practices and personal integrity.
- Our staff will provide a professional work environment that is free from physical, psychological, written, or verbal intimidation or harassment.
- Our staff will not physically, sexually, or emotionally abuse or neglect a youth or adult.
- Our staff will share concerns about suspicious or inappropriate behavior with their supervisor or administrator.
- Our staff will report any suspected abuse or neglect of a youth to the state authorities.
- Our staff will accept their personal responsibility to protect youth and adults from all forms of abuse.

My signature indicates that I have read and understand the above statements.

Signature____

Date ____/___/____/



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Please read carefully before signing this application.

Our organization appreciates your willingness to share your skills. Providing safe and secure programs for our members is of utmost importance to us. The information gathered in this application is designed to help us provide the highest quality programs for the people of our community. Please read the statements below carefully before signing.

- 1. All information contained in this application is true and correct to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired.
- 2. I understand that I can withdraw from the application process at any time.
- 3. I authorize the Fond du Lac Family YMCA to investigate and verify any and all information provided on this employment application. Such information and verification whether favorable or unfavorable may be provided by present or former employers or any individual familiar with my employment background or me. I voluntarily and knowingly fully release and hold harmless any person or organization that provides information pertaining to my employment or me.
- 4. Regardless of whether or not I become employed by the Fond du Lac Family YMCA, I recognize that this application is not and should not be considered a contract of employment. I understand that employment at the Fond du Lac Family YMCA is on an at-will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the Fond du Lac Family YMCA's unless specifically provided otherwise. I further understand that no Fond du Lac Family YMCA employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than an officer or official of the Fond du Lac Family YMCA and then only by means of a signed written document.
- 5. This application for employment shall be considered active for a period not to exceed 90 days.

My signature indicates that I have read and understand the above statements.

Signature_____

Date ____/___/____



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IMMIGRATION AND NATURALIZATION SERVICE INFORMATION

The Fond du Lac Family YMCA hires only United States citizens and aliens lawfully authorized to work in the United States.

In the event you are offered and accept a position with the Fond du Lac Family YMCA, you will, as a condition of employment, be required to complete and sign an Employment Eligibility Verification Form I–9. You will also be required to present original documentation, which both identifies you and establishes your work authorization within three days of your date of hire. If, after you have been hired, any documentation has expired, it is your responsibility to provide your supervisor with current documentation immediately. Failure to do so will result in immediate termination with the Fond du Lac Family YMCA without prejudice to future employment application. This applies to U.S. citizens as well as aliens.

For many persons, the presentation of a social security card, along with either a picture driver's license or state identification card, will be sufficient documentation of identity and work authorization. However, certain other documents will also be acceptable. If you wish to know a complete list of acceptable documents, please speak to the person who is responsible for the hiring of the position for which you are applying. This list can also be obtained from the nearest office of the United States Citizenship and Immigration Services.

If there are any special circumstances that make you exempt from any part of the verification procedures, please inform the Fond du Lac Family YMCA's representatives at the time the verification is requested. Nothing contained therein should be construed by you to be an offer of employment or a promise of any nature.