



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# EMPLOYMENT APPLICATION

## Thank you for your interest in The YMCA of Marquette County

The YMCA of Marquette County is an equal opportunity employer. We do not discriminate in the recruitment, hiring or conditions of employment on the basis of race, religion, color, national origin, citizenship, age, sex, marital status, parental status, handicap, political affiliation, height, weight or arrest record without conviction.

If you would like to join our team, please complete the application below for consideration.

- ◆ Print legibly.
- ◆ Complete all questions, do not leave any spaces blank or write "see resume" in response to any question.
- ◆ Read and sign the application.
- ◆ If you are a student, attach a copy of your schedule for the current or upcoming semester.

## PERSONAL INFORMATION

Name \_\_\_\_\_ Date \_\_\_\_\_  
First Middle Last

Address \_\_\_\_\_  
Street City State Zip

Primary Phone \_\_\_\_\_ Secondary Phone \_\_\_\_\_ Email \_\_\_\_\_

Are you 18 years of age or older? (if not, you may be required to provide authorization to work) YES  NO

If hired, can you provide verification of your legal right to work in the U.S.? YES  NO

Have you ever been convicted of a crime (misdemeanor or felony)? YES  NO

*(A conviction will not necessarily bar employment. The nature, date, circumstance, and relevance to job duties will be considered.)*

If yes, list the date and description of each offense. \_\_\_\_\_

## POSITION DESIRED

- |  |  |   |   |                                       |
|--|--|---|---|---------------------------------------|
| <input type="checkbox"/> Front Desk                          | <input type="checkbox"/> Kidz Zone         | <input type="checkbox"/> Kids' Gym/Y Lounge | <input type="checkbox"/> Youth Sports             | <input type="checkbox"/> Adult Sports |
| <input type="checkbox"/> Personal Trainer                    | <input type="checkbox"/> Lifeguard         | <input type="checkbox"/> Massage Therapist  | <input type="checkbox"/> Day Camp                 | <input type="checkbox"/> Skate Park   |
| <input type="checkbox"/> Maintenance                         | <input type="checkbox"/> Swim Instructor   | <input type="checkbox"/> Wellness Center    | <input type="checkbox"/> Before/After School Care | <input type="checkbox"/> Swim Coach   |
| <input type="checkbox"/> Group Exercise                      | <input type="checkbox"/> Preschool Teacher | <input type="checkbox"/> Teaching Assistant | <input type="checkbox"/> Infant/Toddler Care      |                                       |
| <input type="checkbox"/> Other <i>(please specify)</i> _____ |  |   |   |                                       |

Salary Desired: \_\_\_\_\_ # of Hours Desired: \_\_\_\_\_ Date Available to Start: \_\_\_\_\_

Location Desired:  Marquette YMCA  Vandendoom  West End YMCA  LSV Youth & Family Center  Houghton

Are there any days/hours you are not available to work? YES  NO  If yes, please list \_\_\_\_\_

## GENERAL

Have you ever applied at the YMCA before? YES  NO  If yes, where \_\_\_\_\_ when \_\_\_\_\_

Have you ever worked for the YMCA before? YES  NO  If yes, where \_\_\_\_\_ when \_\_\_\_\_

Explain why you want to work for the YMCA of Marquette County. If you desire a specific position, please explain why and list special skills you have in that area. \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## EDUCATION

	Name and Location	Years Attended	Graduated?	Main Area of Study
High School or GED				
College				
Other				

## EMPLOYMENT HISTORY

<b>1</b>	Employer Name:	Dates of Employment: From _____ To _____
	Address:	Phone:
	Supervisor: (Name and Title)	Position Title:
	Salary: Starting _____ Ending _____	Reason for Leaving:
	Description of Position:	
<b>2</b>	Employer Name:	Dates of Employment: From _____ To _____
	Address:	Phone:
	Supervisor: (Name and Title)	Position Title:
	Salary: Starting _____ Ending _____	Reason for Leaving:
	Description of Position:	
<b>3</b>	Employer Name:	Dates of Employment: From _____ To _____
	Address:	Phone:
	Supervisor: (Name and Title)	Position Title:
	Salary: Starting _____ Ending _____	Reason for Leaving:
	Description of Position:	

## REFERENCES (please list 3 work related references)

Name	Phone	Business	Relationship	Years Acquainted

May we contact your past employers?

YES  NO

If you are currently working, may we contact your current employer?

YES  NO

In the YMCA of Marquette County's effort to attract the highest quality staff, I have been advised that as a part of the applications process for employment with the YMCA of Marquette County, an extensive inquiry will be made concerning my prior employment, activities, and character. I authorize investigation of all statements contained in this application. I understand that falsification, misrepresentation or omission of facts called for may result in immediate termination of employment or removal of my application from consideration. I authorize the YMCA to secure information about my experience with former employers, education institutions and agencies, and for those parties to provide information concerning my experience releasing all parties from any liability arising there from. I authorize the YMCA to secure a credit check and a criminal conviction history. If I am employed by the YMCA, I understand my employment can be terminated, with or without cause, at any time at the option of the YMCA or myself. I further expressly agree that, with respect to the at-will employment relationship, this constitutes the full, complete and final expression of the parties' intent concerning the nature of any employment relationship between myself and the YMCA.

Signature \_\_\_\_\_ Date \_\_\_\_\_