

**Staff Use Only**

Date Turned in: \_\_\_\_\_

Staff Initial: \_\_\_\_\_

Redbud or State Street: \_\_\_\_\_

Applicant Name: \_\_\_\_\_



**EMPLOYMENT APPLICATION**

**YOUNG MEN'S CHRISTIAN ASSOCIATION**  
ABILENE, TEXAS  
(Equal Opportunity Employer)

**PLEASE READ BEFORE COMPLETING THIS APPLICATION**

This association does not discriminate in the recruitment, hiring, and conditions of employment on the basis of race, color, religion, national origin, sex, marital status, disability, age, or veteran status. No information on this application is intended to be in a discriminatory manner. Your completed application will be reviewed carefully, but its receipt does not imply that you will be employed. Employment consideration necessitates that you meet all minimum qualifications required for the position for which you are applying.

## **CAREER OPPORTUNITIES WITHIN THE YMCA**

The YMCA is a community service organization dedicated to helping individuals and families reach their full potential by promoting a healthy lifestyle in spirit, mind and body and by demonstrating Christian values.

Some career opportunities include:

- ❖ **Counseling**
- ❖ **Sports & Physical Education**
- ❖ **Camping**
- ❖ **Child Care**
- ❖ **Adolescent Leadership**
- ❖ **Aquatics**
- ❖ **Community Outreach**
- ❖ **Family Program Leadership**
- ❖ **Health & Fitness**
- ❖ **Marketing**
- ❖ **Accounting & Finance**
- ❖ **Data Processing**
- ❖ **Human Resources/Training Development**
- ❖ **Clerical**
- ❖ **Branch Management**
- ❖ **Transportation**
- ❖ **Administrative**
- ❖ **Maintenance/ Properties Management**

## **THE YMCA'S POSITION ON NATION-WIDE PROBLEM OF CHILD ABUSE**

### **WE MAKE AN ACTIVE EFFORT TO PREVENT CHILD ABUSE**

Some examples may include, but are not limited to:

- ❖ A thorough background check including, but not limited to, references of past employers, personal references, the military, educational institutions, volunteer organizations, civic groups, personal character, health and activities.
- ❖ Allegations or suspicions of child abuse are taken seriously and will be reported to the State for investigation.
- ❖ Programs are structured so that no Staff Member is left alone with a child.
- ❖ Periodic interviews/evaluations with children and parents about day to day experiences, encouraging reports of anything out of the ordinary.
- ❖ Staff and Volunteers will not fraternize with children outside the programs, including baby-sitting or inviting children home.
- ❖ Testing for illegal substances.
- ❖ Psychological testing.
- ❖ Criminal history records check.

## **YMCA GOALS**

- To support and strengthen the family unit.
- To help children develop to their fullest potential.
- To deliver the program in a positive YMCA environment of safety, support and care.



**REFERENCES**

(Name/Phone/Employer/Position/How Long Known)

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**WORK HISTORY (Please list the most recent one first)**

Name of Employer/Organization: \_\_\_\_\_

Employed From: \_\_\_\_\_ to: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Briefly describe your Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Name of Employer/Organization: \_\_\_\_\_

Employed From: \_\_\_\_\_ to: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Briefly describe your Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Name of Employer/Organization: \_\_\_\_\_

Employed From: \_\_\_\_\_ to: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Briefly describe your Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Name of Employer/Organization: \_\_\_\_\_

Employed From: \_\_\_\_\_ to: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Briefly describe your Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

**EDUCATION**

Are you presently in school? Yes\_\_\_ No\_\_\_

High School (Name/City/State):

\_\_\_\_\_

Dates (To/From): \_\_\_\_\_ Courses/Degree: \_\_\_\_\_ Graduate? Yes\_\_\_ No\_\_\_

Have you earned a General Educational Development (GED) or high school equivalency? Yes\_\_\_ No\_\_\_

College/University (Name/City/State): \_\_\_\_\_

Dates (To/From): \_\_\_\_\_ Courses/Degree: \_\_\_\_\_ Graduate? Yes\_ No\_\_\_

Trade/Business/Other (Name/City/State): \_\_\_\_\_

Dates (To/From): \_\_\_\_\_ Courses/Degree: \_\_\_\_\_ Graduate? Yes\_ No\_\_\_

**FRONT DESK QUESTIONNAIRE** (Please fill out if applying for a Front Desk Position)

1. What do you know about the YMCA? \_\_\_\_\_  
\_\_\_\_\_

2. What experience do you have with the YMCA? \_\_\_\_\_  
\_\_\_\_\_

3. Why does this job interest you? \_\_\_\_\_  
\_\_\_\_\_

4. Define Customer Service in your own words: \_\_\_\_\_  
\_\_\_\_\_

5. Describe your computer skills: \_\_\_\_\_  
\_\_\_\_\_

6. Describe your ability to Multi-task: \_\_\_\_\_  
\_\_\_\_\_

7. Please circle when you are available to work:

|                        |                  |                 |                 |                  |
|------------------------|------------------|-----------------|-----------------|------------------|
| <b>Monday – Friday</b> | 5:30am – 9:00am  | 9:00am – 2:00pm | 2:00pm - 6:00pm | 6:00pm – 10:00pm |
| <b>Saturday</b>        | 8:00am – 1:00pm  | 1:00pm – 6:00pm |                 |                  |
| <b>Sunday</b>          | 12:00pm – 6:00pm |                 |                 |                  |

**HEALTH & WELLNESS QUESTIONNAIRE** (Please fill out if applying for Health & Wellness)

1. What is your Health & Wellness background? \_\_\_\_\_

2. Do you have any certifications in group exercise classes? And/or personal training? Please list:  
\_\_\_\_\_

3. Do you have any experience working with children in fitness?  
\_\_\_\_\_

4. What is your current workout regimen consist of?  
\_\_\_\_\_

5. How would you describe yourself?  
\_\_\_\_\_

6. How important is fitness to you? Please explain:  
\_\_\_\_\_  
\_\_\_\_\_

**CHILDCARE QUESTIONNAIRE**

(Please fill out if applying for a Childcare/After School/Summer Camp Position)

1. What do you know about the YMCA? \_\_\_\_\_

2. What experience do you have with the YMCA? \_\_\_\_\_

3. What experience/skills do you have with children? \_\_\_\_\_

4. What experience/skills do you have with children with behavior challenges? \_\_\_\_\_

5. Why do you want to work with children? \_\_\_\_\_

6. How would you describe yourself? \_\_\_\_\_

7. Please rate your preference (1 is highest; 5 is lowest)

Ages 2-4 \_\_\_\_ Ages 4-6 \_\_\_\_ Ages 6-8 \_\_\_\_ Ages 8-10 \_\_\_\_ Ages 10-12 \_\_\_\_

8. Please circle when you are available to work:

|                        |                  |                  |                 |                 |
|------------------------|------------------|------------------|-----------------|-----------------|
| <b>Monday – Friday</b> | 7:30am – 2:00pm  | 8:30am – 10:30am | 2:00pm – 6:00pm | 5:30pm – 7:30pm |
| <b>Saturday</b>        | 8:00am – 1:00pm  | 1:00pm – 6:00pm  |                 |                 |
| <b>Sunday</b>          | 12:00pm – 6:00pm |                  |                 |                 |

9. Place a "1" next to the activities you can organize/teach. Place a "2" next to the activities you can assist with confidently:

**Arts & Crafts**

Painting \_\_\_\_  
 Paper \_\_\_\_  
 Sketching \_\_\_\_  
 Tye Dye \_\_\_\_  
 Nature \_\_\_\_  
 Stitching \_\_\_\_

**Entertainment**

Song \_\_\_\_  
 Drama \_\_\_\_  
 Skits \_\_\_\_  
 Storytelling \_\_\_\_  
 Music \_\_\_\_  
 Dance \_\_\_\_

**Aquatics**

Lifesaving \_\_\_\_  
 Swimming \_\_\_\_  
 Diving \_\_\_\_

**Sports**

Softball \_\_\_\_ Group Games \_\_\_\_  
 Volleyball \_\_\_\_ Tennis \_\_\_\_  
 Football \_\_\_\_ Fishing \_\_\_\_  
 Track \_\_\_\_ Fitness \_\_\_\_  
 Golf \_\_\_\_ Basketball \_\_\_\_  
 Gymnastics \_\_\_\_ Cheer \_\_\_\_

List below the names of relative, friends or acquaintances employed by this association and their relationship to you

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**CPR, AED, FIRST AID, AND OXYGEN – ALL EMPLOYEES**

Effective May 31, 2010 every YMCA employee is required to have current CPR, AED, First Aid and Oxygen certifications in order to be employed by the YMCA of Abilene. This requirement is necessary for the safety of both our staff and the members we serve. The YMCA does provide training sessions and there may be a fee. I do understand that if I do get hired I will be required to get CPR, AED, First Aid, and Oxygen certifications within one month.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**CONFLICT OF INTEREST DOCUMENT**

Employees shall avoid any personal influences or relationships that would affect their ability to act in the best interests of the YMCA of Abilene. While employed by the YMCA of Abilene, Aerobic/Group Exercise Instructors and Personal Trainers are not allowed to work for any other fitness facility. Instructors and Trainers are not allowed to “free-lance” business from YMCA Members or Members attending other local health clubs. This policy ensures that each employee be dedicated to and work solely for the benefit of the YMCA of Abilene.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**EMPLOYEE RELEASE FORM**

I hereby certify that the information provided on this application is accurate to the best of my knowledge and subject to verification by the YMCA. I authorize the schools, persons, previous employers, agencies and other organizations named in this application to provide the YMCA (its authorized employees, agents or representatives) with any relevant information that may be required to arrive at an employment decision and hereby release any such schools, persons, and hereby release any such schools, persons, employers, agencies and organizations from any and all liability which they might otherwise incur as a result. I understand that any misrepresentation or omission of a material fact on my application may be justification for refusal of employment.

In the event I am employed, I understand that all employees are subject to termination at the discretion of the YMCA. If, in the event I choose to voluntarily terminate my employment, I am free to do so at any time, and, if I choose to give proper notice of termination, the association may either permit me to continue my employment during the notice period or may accept my resignation immediately.

I understand that, in the event I am employed by the YMCA, my compensation, hours of employment and all other terms and conditions of employment are subject to modification or change by the YMCA at the YMCA's discretion. I also understand that, if employed any misrepresentation made by me completing this application shall be considered as sufficient cause for my dismissal without advance notice. I authorize the YMCA to supply my employment record, in whole or in part, and in confidence, to any prospective employer, government agency, or other party, with a legal and proper interest. In the event of my employment, I will comply with all rules and regulations as set forth in the YMCA's policy manual or other communications distributed to employees, and understood a condition of my continued employment will be my compliance with the YMCA's controlled substance abuse and testing policy. I have read, understand and support the YMCA's position on the problem of child abuse.

I also understand that my employment is conditional upon my satisfactorily passing a physical examination and/or drug screening, if one requested, to be given by a physician or registered nurse selected by the YMCA and until results of my driving record, my criminal history record, reference checks, and other documents required by law are completed, and until information given by me has been verified. I understand that completion of this form does not guarantee me status as an applicant or any consideration for employment unless I meet all stated minimum qualifications required of the position for which I am asking to be considered.

CONVICTIONS: A conviction does not automatically mean you will not be offered a job. What you were convicted of, the circumstances surrounding the conviction and how long ago the conviction occurred are important considerations in determining your eligibility. Give all the facts, so that a fair decision can be made.

**I have read the above statement and accept the same as condition of my employment with the YMCA.**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_