

GREEN COUNTY FAMILY YMCA, Inc.
1307 2nd St., Monroe, WI 53566

APPLICATION FOR EMPLOYMENT

DATE: _____

Name _____
(Last) (First) (Middle)

Address _____

Are you at least 16 years old? ___ Yes ___ No Email address _____

Phone (H) _____ (C) _____

Are you lawfully eligible to be employed in this country? ___ Yes ___ No

Do you have any felony convictions? ___ Yes ___ No

Have you ever been convicted of a crime involving children or youth? ___ Yes ___ No
(Conviction will not necessarily disqualify applicant from employment)

Have you ever been discharged from employment? ___ Yes ___ No

PREVIOUS EMPLOYMENT

Employer _____ Supervisor _____

Position _____ From _____ To _____

Pay \$ _____ Reason for leaving _____

Summary of job duties _____

Employer _____ Supervisor _____

Position _____ From _____ To _____

Pay \$ _____ Reason for leaving _____

Summary of job duties _____

EDUCATION

High School _____ Years completed _____ Degree _____

College/other _____ Years completed _____ Degree _____

Honors and/or activities in school relevant to employment _____

Describe any special skills, knowledge, or abilities related to the position you are applying for _____

When are you available to work (i.e. after 4:00 p.m. only Tuesday and Friday)? _____

Would you prefer: ___ Full time ___ Part time

POSITION APPLYING FOR _____

Why do you want to work for the YMCA? _____

PROFESSIONAL REFERENCES

1. _____ Phone _____

Address _____

2. _____ Phone _____

Address _____

PERSONAL REFERENCES

1. _____ Phone _____

Address _____

I certify that the statements in this application are true, correct and complete. The YMCA is hereby authorized to investigate all statements. I understand that any false statements will constitute sufficient cause and reason for refusal of employment or termination of employment.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

I understand, acknowledge and agree that if employed by the YMCA, my employment will be at will and without fixed term, and that either of us may terminate the employment at any time with or without prior notice and without cause. I authorize the YMCA to obtain any relevant references of my previous and current employment history. I also understand that my status as an at will employee may not be changed, altered or amended, except in writing by a duly authorized official of the Green County Family YMCA, expressly and specifically so providing.

Applicant's Signature _____ Date _____

FOR OFFICE USE ONLY:

Position hired for _____

Start date _____

Pay rate _____