



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

**AKRON AREA YMCA**  
**akronymca.org**

Check the one that applies to you:

- Employment Application
- Volunteer Application

YMCA Branch \_\_\_\_\_ Date \_\_\_\_\_

Position Applying for \_\_\_\_\_

Date Available \_\_\_\_\_ Hours Available \_\_\_\_\_

Qualified applicants are considered for the position(s) applied for without regard to race, color, religion, sex, national origin, age, citizenship, qualified disability, and ancestry or veteran status. We are committed to a Diverse Workforce.

**INFORMATION – PERSONAL**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Current Employer \_\_\_\_\_

Have you ever previously been employed by any YMCA? \_\_\_\_\_

If yes, when and where were you employed? \_\_\_\_\_

And in what position? \_\_\_\_\_

How did you hear about the position you are applying for? \_\_\_\_\_

**SKILLS** Please list your special skills and/or training pertinent to this position \_\_\_\_\_

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**ACTIVITIES** Please list any community, extracurricular or professional activities (i.e.: clubs or associations) and any leadership experience or offices held. (Note: Under current federal law, you are not required to list any organization which may indicate race, sex, religion or national origin.)

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**NOTE** Conviction of a crime will not be an automatic bar to employment or volunteering. All circumstances will be considered in evaluating the applicant's suitability for employment or volunteer status.

Have you ever been convicted of a misdemeanor or for any felony?

Misdemeanor \_\_\_\_\_ Felony \_\_\_\_\_

If yes, month/year \_\_\_\_\_

Please explain \_\_\_\_\_

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

**INFORMATION - EDUCATION**

Name & Location of School	Course of Study	#Years Completed	Did you graduate?
Graduate School			
College/Business-Trade or Tech			
High School or GED			
Training-Other			

**EMPLOYMENT HISTORY**

**A resume may not be used as a substitute for completion of this page.**

Please provide accurate and complete information on your full-time and part-time employment record. Start with your present or most recent employer. Military and/or volunteer experience may also be listed in this section.

Current/Most Recent Employer \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Employment Dates \_\_\_\_\_

Supervisor \_\_\_\_\_ Starting/Ending Salary \_\_\_\_\_

Job Title/Description of Work \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Next Most Recent Employer \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Employment Dates \_\_\_\_\_  
Supervisor \_\_\_\_\_ Starting/Ending Salary \_\_\_\_\_  
Job Title/Description of Work \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

Next Most Recent Employer \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Employment Dates \_\_\_\_\_  
Supervisor \_\_\_\_\_ Starting/Ending Salary \_\_\_\_\_  
Job Title/Description of Work \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

### NOTES

You may use a separate sheet of paper for any additional work history. Please include the same information as above. We may contact the employers listed unless you indicate those you do not want the YMCA to contact. If you indicate that you do not want a previous or current employer contacted, please list the reason(s) \_\_\_\_\_

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

### NOTICE TO APPLICANT

Please read and initial each box.

I certify the above statements made in this application are true, correct and complete. I understand and agree that any falsification or omission either on this form or in my response to questions asked during the interviewing or examination process or on employment forms I may subsequently complete, including "I-9" forms, may result in immediate termination of employment, no matter when the falsification or omission is discovered.

I understand that this application will not be considered if not filled out completely.

It is understood that this application does not obligate the YMCA in any way and does not indicate any open positions.

I understand that the Y is the nation's leading nonprofit committed to strengthening communities through Youth Development, Healthy Living and Social Responsibility.

I understand that as a staff member of the Akron Area YMCA I will be committed to the Y Mission.

I understand that as an employee/volunteer of the Akron Area YMCA I will be committing to the association's Member Service Promise to be friendly, attentive, and demonstrate the Y values of caring, honesty, respect and responsibility while I am on the job and/or volunteering for the association.

I understand that my signature constitutes my authorization for the Akron Area YMCA to investigate the facts submitted and for those with relevant information, including, but without limitation, physicians, hospitals, schools, law enforcement agencies, my prior employers and/or personal references to provide such information to the Akron Area YMCA, and I release them from liability for doing so.

I understand that a copy of this form shall serve as my authorization to release information and records to the extent such information is job-related and consistent with the Employer's business needs. I hereby consent to undergo such drug screenings and post-offer medical examinations as the Akron Area YMCA may require (which may include obtaining body tissue or fluid samples and analysis of them).

I understand that, if hired, my employment is to be "at will" and that either I or my employer may terminate my employment at any time, with or without cause, unless the "at will" arrangement is modified by a written agreement signed by both myself and the President of the Akron Area YMCA.

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Applicant Signature

Date