



**FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

ALLEGHENY VALLEY YMCA

APPLICATION FOR EMPLOYMENT
(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 question on this application is intended to secure information to be used 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.

(ANSWER ALL QUESTIONS COMPLETELY)

PERSONAL DATA

Name _____ Date _____
Last First Middle

Current Address _____ Telephone: Home _____
Street City Zip Business

Last Previous Address _____ to _____
Street City Zip Dates living at this address

List other cities, counties and states where you have lived/worked:

_____	_____	_____	_____	_____	_____	_____	_____
<small>City</small>	<small>County</small>	<small>State</small>	<small>Number of Years</small>	<small>City</small>	<small>County</small>	<small>State</small>	<small>Number of Years</small>
_____	_____	_____	_____	_____	_____	_____	_____
<small>City</small>	<small>County</small>	<small>State</small>	<small>Number of Years</small>	<small>City</small>	<small>County</small>	<small>State</small>	<small>Number of Years</small>

Are you 18 years of age, or over? Yes No Are you a veteran? Yes No _____
If Yes, Dates of Military Service

Are you authorized to work in the United States? Yes No
(If you are hired, you will be required to furnish proof of your employment eligibility)

Other names used during prior employment _____
Maiden names, Other Surnames, Etc.

FURNISH THIS INFORMATION ONLY IF REQUESTED

Social Security Number _____ Driver's License Number _____ State _____ Class _____

How many moving violations during the last 3 years _____ Do you currently have liability insurance? _____

GENERAL

Applying for position as _____ Acceptable Salary/Hourly Range _____
 Full Time Part-time Temporary Notice Required _____
Date available _____

If applying for seasonal work, are you available to work during the school term? Yes No
Have you previously applied for employment for any YMCA? Yes No Worked for any YMCA? Yes No

If so, when? _____ Location _____
How were you referred to the YMCA? Employee Advertisement School Drop in Agency Other

Name of referral source indicated above _____
Have you failed to be reemployed, ever been involuntarily discharged, fired or asked to resign a position?

Yes No If yes, give dates and circumstances _____

EMPLOYMENT LIST ALL POSITIONS YOU HAVE HELD, BEGINNING WITH YOUR MOST RECENT. INCLUDE SELF-EMPLOYMENT AND VOLUNTEER WORK.

Current, or last, employer _____ Employed from _____ to _____
Street address _____ Salary (monthly) at start _____ to _____
City _____ State _____ Zip _____ Telephone _____
Name of your direct supervisor _____ Your title _____
Briefly describe your responsibilities: _____

Any experience with children? Yes No If yes, please give description of children:
Number of children _____ Age group _____ Sex: Male Female Both

Any experience supervising staff? Yes No If yes, describe _____

Reason(s) for terminating, or considering a change _____

What did you like most about this job? _____

What did you like least about this job? _____

May we contact this employer while we are considering your application? Yes No

Current, or last, employer _____ Employed from _____ to _____
Street address _____ Salary (monthly) at start _____ to _____
City _____ State _____ Zip _____ Telephone _____
Name of your direct supervisor _____ Your title _____
Briefly describe your responsibilities: _____

Any experience with children? Yes No If yes, please give description of children:
Number of children _____ Age group _____ Sex: Male Female Both

Any experience supervising staff? Yes No If yes, describe _____

Reason(s) for terminating, or considering a change _____

What did you like most about this job? _____

What did you like least about this job? _____

May we contact this employer while we are considering your application? Yes No

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

THE YMCA ENDORSES AND ENFORCES ITS POLICIES AND PRACTICES TO PREVENT CHILD ABUSE

Our first priority in all youth programs is care and safety. We make an active and, we believe, effective effort to prevent child abuse, Verbal, physical, emotional or sexual.

The YMCA goals are:

- 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.

Allegations or suspicions of child abuse are taken very seriously by the YMCA and will be reported to the State for investigation And the YMCA will fully cooperate with any related investigations and will pursue the prosecution of child abusers to its full extent Under the laws of this State.

All candidates will be subject to thorough background investigation to screen out molesters which may include, but are not Limited to, checking the following:

- References of past employers
- Personal references
- Military records
- Volunteer organization history
- Periodic interviews with children and parents about day-to-day experiences, encouraging reports of anything out of the ordinary.
- Civic involvement
- Criminal background history
- Personal characteristics / activities
- Psychological testing

STAFF CODE OF ETHICS

1. Staff will not verbally, physically, emotionally, or sexually abuse a child.
2. Staff will not be alone with children except with prior approval of senior management or in an emergency.
3. Staff will not use profanity in the presence of children, parents, participants, or other staff.
4. Staff will not display intimate affection towards others in the presence of children, parents or other participants.
5. Staff will not accept gifts or money from children, parents or other participants, nor will staff give gifts or money to children, parents or other participants.
6. Staff / volunteers will not socialize, associate, or provide services (such as babysitting, private lessons, etc.) for program participants under the age of 18 years outside of YMCA activities. There will be no expectations unless individually approved by the Executive.
7. Staff will report any suspected abuse or neglect of a child to the Child Protective Services of Pennsylvania, as required by Pennsylvania State law.

Applicant / Employee _____ Date _____

STAFF CODE OF ETHICS (Continued)

8. Staff will, at all times, portray a positive role model for children and youth by demonstrating respect, loyalty, patience, Courtesy, tact, and maturity.
9. Staff will treat all children, regardless of age, race, religion, ethnicity, gender, or disability with respect, compassion and Kindness.
10. Staff will use only positive techniques of guidance and discipline, such as anticipation and prevention of potential problems, positive reinforcement and encouragement, and redirection.
11. Staff will never leave a child unsupervised.
12. Staff will appear clean, neat and appropriately dressed.
13. Staff will not attend work with physical psychological conditions that might adversely affect children's health or safety.
14. Staff will not use tobacco products during working hours in the presence of children or parents.
15. Staff will not use, possess, or be under the influence of alcohol or illegal drugs during working hours.

I have read and understand "The YMCA's Position on the Nation-wide Problem of Child Abuse" and the Staff Code of Ethics. I understand that any violation of the Code of Ethics may result in termination. Being fully aware of the matters Contained in this Staff Code of Ethics, I still desire consideration for employment by the YMCA.

Applicant / Employee _____ Date _____

ARREST AND CONVICTION RECORD

READ CAREFULLY

The YMCA checks arrest records of all volunteers and applicants for employment.

A conviction does not necessarily mean that the YMCA will reject your application. We consider the nature of the offense, your age at the time, how long ago the offense occurred, and the position for which you are applying, among other factors. However, a false answer to this question may disqualify you from further consideration, or result in your termination for falsifying your application.

This question covers all crimes, including traffic offenses, except those traffic violations for which there was no final Conviction (for example, you took a defensive driving course), or a fine of less than \$100 was paid.

Have you ever been convicted of, or pleaded guilty or "no contest" to, any criminal offense? Yes No

If you answered "Yes," give dates, places, and details:

COMPLETE IF APPLYING TO WORK WITH CHILDREN

Why do you want to work with and care for children? _____

With what age group or sex do you prefer to work? Why? _____

What is your philosophy about discipline? _____

What do you do when you are upset or angry about something? _____

Are you a pedophile or child abuser? Yes No

Have you ever been accused of being a pedophile or child abuser? Yes No If yes, please explain:

Other than through employment how are you involved with children? _____

List the 3 greatest strengths and the 3 most difficult problems you have in working with children.

GREATEST STRENGTHS

MOST DIFFICULT PROBLEMS

1. _____

1. _____

2. _____

2. _____

3. _____

3. _____

EDUCATION	PRINT NAME, CITY AND STATE FOR EACH SCHOOL LISTED	DATES	TYPE OF COURSE OR MAJOR	GRAD- UATED	DEGREE RECEIVED
-----------	--	-------	----------------------------	----------------	--------------------

High School	_____	From _____ To _____			
College	_____	From _____ To _____			
College	_____	From _____ To _____			
Trade, Bus.,	_____	From _____ To _____			
Other	_____	From _____ To _____			

Are you presently in school? Yes No If yes, give expected completion date _____

List courses you are taking _____

If not a high school graduate, indicate highest grade completed _____

If not a high school graduate, have you earned a General Education Development (GED) or high school equivalency? Yes No

SPECIAL SKILLS

Describe any volunteer work, other experiences, interest, training, or honors received in connection with your service to any Organizations which you consider relevant to your ability to perform the job sought. _____

List all current special license(s), permit(s), certification(s) and level or credited hours. (CPR, lifeguard, first aid, etc.)

Type	Level	Expiration Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List equipment, machinery or special skills relative to your ability to perform the functions of the position for which you are applying. Include your skill level and / or years of experience _____

PERSONAL REFERENCES (Not Employers)

List four references. Must include one relative. At least one reference must be male and one reference a female.

NAME AND HOME ADDRESS	FIRM NAME/ADDRESS, IF APPLICABLE	PHONE NUMBERS	RELATIONSHIP	HOW LONG
		DAY: _____ EVE: _____		
		DAY: _____ EVE: _____		
		DAY: _____ EVE: _____		
		DAY: _____ EVE: _____		

LIST BELOW THE NAMES OF RELATIVES, FRIENDS OR ACQUAINTANCES EMPLOYED BY THIS ASSOCIATION AND THEIR RELATIONSHIP TO YOU.

PLEASE READ CAREFULLY BEFORE SIGNING

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 YMCA, its affiliates and their representatives to investigate all information given and to secure additional job-related information, if necessary. I authorize an investigative report to be made whereby information is obtained through personal interviews with third parties, such as family members, business associates, financial sources, friends, neighbors or others with whom I am acquainted. I understand and consent to an inquiry that may include information as to my character, general reputation, and personal characteristics, whichever may be applicable. This information may include, but is not limited to, verification of previous employment and employment references, verification of education including requests for transcripts, credit reports, motor vehicle driving records and criminal reports, etc. I hereby release from all liability or responsibility all persons, companies, organizations or corporations furnishing such information.

I also understand that any misrepresentation or omission of a material fact on my application may be justification for refusal of employment, or if employed, dismissal without advance notice.

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, employers, agencies and organizations from any and all liability which they might otherwise incur as a result.

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 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 understand 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 understand that beginning and continuing employment at the YMCA depends, in part, on the following:

1. Passing a drug screen and/or physical examination, if requested by the YMCA, to be given by a doctor, nurse, or medical facility selected by the YMCA.
2. Satisfying the YMCA's requirements concerning:
 - A. My driving record
 - B. My criminal history record
 - C. Reference checks, and
 - D. Documents required by law

I understand that as long as my employment with the YMCA lasts, the YMCA may repeat any or all of the above requirements at any time.

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.

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

Signature of Applicant

Date