

YMCA of Kern County Employment Application

Please complete all sections even if you are furnishing a resume.

Personal

Name Last/First _____		Position Applied For _____	
Present Address _____	City _____	State _____	Zip _____
Home Phone _____	Message Phone _____	Social Security No. _____	
Are you over the age of 18? Y/N _____		Are you a U.S. Citizen? Y/N _____	
If not a U.S. Citizen, please provide your Alien Registration #: _____			
Have you worked for the YMCA previously? Y/N _____			
When: _____		Location: _____	
List any relatives or friends working for the YMCA: _____			
Have you ever been convicted of a felony? Y/N Explain: _____			

Record of Education

School	Name & Address of School	Course of Study	Last Year Attended	Did you Graduate?	Diploma or Degree
High Sch.			1 2 3 4	Y/N	
College			1 2 3 4	Y/N	
Other			1 2 3 4	Y/N	

Skills, Licenses and Certificates

Please list job-related skills, licenses and certificates that you have such as driver's license, CPR, Lifesaving Certificate, First Aide, CPA, etc.:

Professional and Volunteer Activities

List professional trade, business or civic activities, offices and positions held.
Exclude groups which indicate race, religion, sex or national origin:

Employment History

Employer:	Date	Work Performed:
Phone:	From:	
Address:	To:	
	Hourly Wage	
Job Title:	Starting:	
	Final:	
Supervisor:	Reason for Leaving:	
Employer:	Date	Work Performed:
Phone:	From:	
Address:	To:	
	Hourly Wage	
Job Title:	Starting:	
	Final:	
Supervisor:	Reason for Leaving:	
Employer:	Date	Work Performed:
Phone:	From:	
Address:	To:	
	Hourly Wage	
Job Title:	Starting:	
	Final:	
Supervisor:	Reason for Leaving:	

Please list additional jobs if more than three in the last 5 years on a separate sheet of paper.

If you've been out of work for three months or more please explain:

References

Name	Address	Relationship/Phone Number

Agreement

The facts set forth in my application for employment are true and complete. I understand that if employed, false information on this form, or failure to disclose material facts will be considered grounds for discharge.

I understand that in the event of employment, my employment shall be for no specific term and may be terminated at the will of myself or the YMCA at anytime.

I further understand that, if employed, I am required to abide by all established policies and procedures of the YMCA.

Signature of the Applicant

Date

For Interviewers Use Only!

Reference Check:	
Interview Notes:	
Employed? Y/N	Hourly Rate/Salary:
Position:	Interviewed By:
Title:	Date Interviewed: