

EMPLOYMENT APPLICATION



**MCPHERSON
FAMILY
YMCA**

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, disability or veteran status.



**MCPHERSON
RECREATION
COMMISSION**



Employees of this organization are selected in order to accomplish the legal and operational duties established by statute and by the policy choices of the organization's Commissioners/Board Members. Each employee is expected to conduct him / herself in a manner which reflects favorably upon the organization and to recognize that our employees are subject to additional public scrutiny in their public and personal lives.

Last Name		First	Middle	Date
Street Address				Home Telephone
City/State/Zip				Cell Telephone Texting Y N
Have you ever applied for employment with us? Yes No If yes: Month and Year _____				Email Address
Position Desired				Are you at least 18 years of age? Yes No If no, provide birth date _____
Are you available for full-time work? Yes No If not, what hours can you work?				Will you work overtime, if asked? Yes No
Are you legally eligible for employment in the United States? Yes No				When will you be available to begin work? _____
Other special training or skills (languages, machine operation, etc..)				

Membership in Professional or Civic Organizations
(Exclude those which may disclose your race, color, Religion or national origin)

EMPLOYMENT HISTORY

Please give accurate, complete full-time and part-time employment record.
Start with your present or most recent employer.

Company Name	Telephone
Address	Employed - (State month and Year) From To
Name of Supervisor	Hourly Pay Rate Start Last
State Job Title and Describe your work:	Reason for Leaving:

Company Name	Telephone
Address	Employed - (State month and Year) From To
Name of Supervisor	Hourly Pay Rate Start Last
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Company Name	Telephone
Address	Employed - (State month and Year) From To
Name of Supervisor	Hourly Pay Rate Start Last
State Job Title and Describe your work:	Reason for Leaving:

WE MAY CONTACT THE EMPLOYERS LISTED UNLESS YOU INDICATE THOSE YOU DO NOT WANT US TO CONTACT.	<p style="text-align: center; margin: 0;">DO NOT CONTACT</p> Employer Number(s) _____ Reason: _____ _____ _____
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EDUCATION

School	Name and Location of	Course of Study	No. of Years	Did you Graduate
Graduate				
College / Business / Trade				
High School				
Elementary				

REFERENCES

(Please list at least one family member as a reference. Need complete addresses)

NAME:	COMPLETE ADDRESS:	PHONE:	YEARS KNOW:	RELATIONSHIP:
	EMAIL ADDRESS:			
NAME:	COMPLETE ADDRESS:	PHONE:	YEARS KNOW:	RELATIONSHIP:
	EMAIL ADDRESS:			
NAME:	COMPLETE ADDRESS:	PHONE:	YEARS KNOW:	RELATIONSHIP:
	EMAIL ADDRESS:			
NAME:	COMPLETE ADDRESS:	PHONE:	YEARS KNOW:	RELATIONSHIP:
	EMAIL ADDRESS:			
NAME:	COMPLETE ADDRESS:	PHONE:	YEARS KNOW:	RELATIONSHIP:
	EMAIL ADDRESS:			

Are you, or have you ever been employed by any YMCA/ or Recreation Commission?

Yes No If yes, when _____

What location: _____

Name used when employed at that location _____

Were you referred to the YMCA/MRC by: Own Accord YMCA Employee
MRC Employee Other _____

Have you ever participated in the YMCA or KPERS Retirement Fund?
 Yes No If yes, when and which fund _____

Have you ever been bonded? Yes No
 If yes, with what employers? _____

How long at present address? _____ years Previous Address: _____
 How long at previous address? _____ years

State names of relatives and friends working for us.

Have you ever been convicted of a crime, on diversion for a crime or are you now charged for any offense against the law? NO YES If your answer is "Yes" give details below. Show for each offense: (1) date, (2) charge, (3) place, and (4) disposition. NOTE: A conviction does not automatically mean you cannot be considered. What you were convicted of and how long ago, are important. Give all of the facts so that a decision can be made.

DATE	CHARGE	LOCATION	DISPOSITION

I certify the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand if employed, false statements in this application shall be considered sufficient cause for dismissal. It is understood employment with the McPherson Family YMCA and or McPherson Recreation Commission is subject to passing a criminal records check and a child abuse screening; therefore, I authorize the YMCA/MRC to conduct a background check, child abuse screening and make investigation of my prior educational and work history. MRC employment requires a drug screening, as part of the pre-employment process.

I understand if I am hired, the length of my employment is not guaranteed. Recognizing I will be free to voluntarily terminate my employment at any time with or without cause, I acknowledge the YMCA/MRC is an at-will employer and will be free to terminate my employment at any time, with or without cause.

_____ Date _____ Signature

MCPHERSON FAMILY YMCA **YMCA Mission: To put Christian principles into practice through programs that build healthy spirit, mind and body for all.** **MCPHERSON RECREATION COMMISSION** **The Benefits are Endless!**