EMPLOYMENT APPLICATION



FAMILY

YMCA

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



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 appl Yes No	ied for employment If yes: Month a	with us? nd Year	Email Address	
Position Desired			Are you at least 18 ye Yes No If no	ears of age? , provide birth date
Are you available fo Yes No If n	or full-time work? ot, what hours can yo	ou work?	Will you work overti Yes No	me, if asked?
Are you legally elig Yes No	ible for employment	t in the United States?	When will you be ava	ailable to begin work?
Other special traini	ng or skills (languag	es, machine operation, et	c)	

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 w	vork:	Reason for Leaving:	
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 w	vork:	Reason for Leaving:	
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.	Employer Numb	DO NOT CONTACT er(s) Reason:	

EDUCATION

School	Name and Location of	Course of Study	No. of Years	Did you Gradu- ate
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? If yes, when_____ Yes No

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 pres	ent address?years	Previous Address:			
		How long at previous address?	years		
State names of	relatives and friends working	g 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
YMCAYMCA Mission: To put Christian principles
into practice through programs that build
healthy spirit, mind and body for all.MCPHERSON
RECREATION
COMMISSION

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