

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a physical or mental handicap or disability, or any other characteristic protected by law. It is our intention that all applicants be given equal opportunity and that selection decisions are based on job-related factors.

| Date of Application | Date Available | _ Position Applying for_ | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------|--------------|
| Name: Last | First | Middle Initial | |
| Phone No. () | Email Address: | | |
| Address | City | State | Zip |
| Would you accept: Full Time Temporary | | hours/week | Weekend Work |
| Hours/Days Available to Work: | | | |
| Winter: | Spring: | Summer | |
| Area of Interest for Work: Gr I Member Services Cus Other: How did you hear about job openin | todial Day Camp | | |
| Are you over 16 years of age? | Yes No | | |
| Have you ever been convicted of a Please note: A criminal conviction does examine the nature of the conviction re making each employment decision. | not by itself constitute an at | solute bar to employment. | |
| | EDUCATION D | ΑΤΑ | |
| Circle Highest Grade Completed: Name of Last School Attended Attended From: Month | Year To: Month | City/State Year | _ Graduated? |
| Diploma Degree (t | ype) | _ Major Area of Study | |
| Other Education Relevant to Position | on | | |
| Professionals: ND License or Certil | icates | | |
| Clerical Applicants: Check equipme | ent you have experience ir | operating: | |
| | K MachinesCash | | • |
| Computer List Software P | rograms | | |
| Other Training: (Courses, Worksho | ps, or Other Qualifications | Applicable to this Positic | on) |

PLEASE COMPLETE BOTH SIDES OF APPLICATION

PRESENT OR MOST RECENT EMPLOYMENT INFORMATION

| 1. Firm | Phone No. () | | |
|----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|------------------------|------------------|
| Address | City | State | Zip |
| Name of Immediate Supervisor and Th | eir Title | | |
| | Dates of Employment | | |
| Duties | | | |
| Reason for Leaving | | | |
| May We Contact the Employer Liste | ed Above as a Reference? | | |
| PREVIOUS | S EXPERIENCE OR PERSO | NAL REFERENCE | |
| 2. Name of Reference | P | hone No. () | |
| Address | City | State | Zip |
| If Previous Employer: | | | |
| Position Held | Dates of Employment | | |
| Duties | | | |
| Reason for Leaving | | | |
| | PERSONAL REFERENCE | CE | |
| 3. Name of Reference | P | hone No. () | |
| Address | | | |
| Relationship to Reference Person | | | |
| "I hereby authorize all of my former emplo associated with as reference to give to the employment record, together with any info | YMCA Family Center any inform | nation that they may h | ave regarding my |

employment record, together with any information they may have regarding me, whether or not such information is on their records. I hereby release said companies and individuals from any liability for any damages whatsoever resulting from the giving of such information."

| Dated: | Signature: | | |
|--------|------------|--|--|
| | | | |

CERTIFICATION OF UNDERSTANDING

I Certify that all matters contained in this application are true, authorize their investigation and agree that any misleading or false statements would render this application void and is sufficient cause for immediate dismissal in the event of employment. I understand that my employment is dependent upon receipt by the YMCA of satisfactory references, attendance at orientation, verification of certification in CPR, and completion of the probationary period. I agree to conform to the rules and regulations of the Altru Family YMCA and acknowledge that these rules and regulations may be changed, interpreted, withdrawn, or added to, by the Altru Family YMCA at any time and without prior notice to me. I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between the YMCA and myself for either employment or for the providing of any benefits. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding unless expressly made in writing. If an employment relationship is established, I understand that I have the right to terminate my employment at any time, and the YMCA retains a similar right regarding the discontinuation of my employment.

Dated:______Signature:_____

YMCA Mission: To put Christian principles into practice through programs that Build healthy spirit, mind and body for all.