



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

The YMCA of Tuscaloosa

Employment Application

Tuscaloosa YMCA Family Center
2300 13th Street
Tuscaloosa, AL 35401
205-345-9622

Benjamin Barnes Branch
2939 18th Street
Tuscaloosa, AL 35401
205-759-4284

Name	(Last)	(First)	(Middle)
Current Address	City	State	Zip Code
Phone Number ()	E-Mail Address	Social Security Number	
Position Applying For:	Preferred Branch:	Date Available: / /	

EDUCATION

High School	City	State
Years Completed	Freshman Sophomore Junior Senior GED	
College	Major	
Minors	Years Completed Fr Soph Jr Sr	Degree Earned

TRAINING / CERTIFICATION AND ACHIEVEMENTS (Example: First Aid, CPR, Lifeguarding)

Course	Expiration Date

AVAILABILITY

PLEASE WRITE IN DAILY AVAILABILITY BELOW:

FOR INTERVIEWER'S USE

Position _____

Full Time _____ Part Time _____ Seasonal _____ Rate of pay \$ _____ per _____

Work Location _____

Account Number _____ Offer Date _____

Starting Date _____ APPROVED BY _____

PREVIOUS EMPLOYERS (List the last three employers starting with the most recent)

Company	Company	Company
Position	Position	Position
Dates of Employment From To	Dates of Employment From To	Dates of Employment From To
Supervisor	Supervisor	Supervisor
Phone Number ()	Phone Number ()	Phone Number ()
Reason for Leaving	Reason for Leaving	Reason for Leaving
Salary:	Salary:	Salary:

Have you ever worked for the YMCA before? YES _____ NO _____

If so, have you ever participated in the YMCA Retirement Plan? YES _____ NO _____

Which Branch/Association? _____ Dates of Employment: _____

Have you ever been convicted of a felony? YES _____ NO _____

If so, Date: _____ Charge _____

City _____ State _____

PERSONAL/PROFESSIONAL REFERENCES (Must include one relative)

Name	Address	Phone Number
1		
2		
3		

"I certify that the information contained in this application is true and accurate to the best of my knowledge. I understand that falsification of this application in any detail is grounds for disqualification from further consideration of/or for dismissal from employment. I hereby authorize the YMCA to contact my previous employers and my personal references and I understand that the YMCA may choose to do a background investigation which may involve contacting some or all of the following sources: Criminal Court Clerk, Department of Human Services, and any relevant state bureau. I hereby authorize all of these sources to release information about me, and I understand that the YMCA may contact sources not listed herein."

"I agree to conform to the rules and policies of the YMCA and understand that my employment and compensation can be terminated, with or without cause, at any time, at the option of either the YMCA or myself. I understand that no representative of the YMCA has any authority to enter into any agreement for employment for any specified period of time, unless the agreement is in writing and signed by the President/CEO or Vice President of Leadership Development."

*I certify that I am authorized to work in the United States.

Date _____ Signature _____

Equal Employment Opportunity: It is a policy of the YMCA to implement the Equal Employment Opportunity Act for all employees and applicants for employment without regard to race, creed, religion, mental or physical disability, national origin, color, ancestry, sex, and age.