Application For Employment

Henderson Family YMCA

380 Ruin Creek Road Henderson, NC 27536 (252) 438-2144



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Position Applied for	Date
APPLICATION FOR FM	IPIOYMENT (Plance Print Clantly)

Please Answer All Questions. Resumes Are Not A Substitute For A Completed Application.

We are an equal opportunity employer. Applicants are considered for positions without regard to veteran status, uniformed service member status, race, religion, sex, national origin, age, physical or mental disability, genetic information or any other category protected by applicable federal, state, or local laws.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE.

Current email address		
Telephone Number ()	Alternate or Cellular Telephone N	lumber ()
Present Address		
Street, Apartmer	nt, or Unit Number	
City	State	Zip
How long have you lived there	/	
Years /	Months	
Desired Salary/Hourly Rate		
f under the age of 18, can you produce th	he necessary work certificate at the time o	f employment? Yes [] No[]
Type of employment desired? Full-time []	Part-time [] (Specify Hours)	
Are you willing to work overtime? Yes []	No []	
Date on which you can start work if hired		
Have you previously applied for employme	ent with this Company? Yes [] No []	
f Yes, when and where did you apply?		
Have you ever been employed by this Com	pany? Yes [] No [] If Yes, provide dates	of employment, location, and reason fo
separation from employment.		

INSTRUCTIONS FOR ANSWERING THE NEXT TWO QUESTIONS

tions that resulted in referral to a diversion program.

above? CRIMINA	lead guilty or no contest to, on the contest to, one contest to, one contest to, one contest to, or contest to,	swered Yes, to either o	of the below to	vo questions, please pro	•
No[] Yes[]					
Have you ever b	een arrested for any matters	for which you currentl	y are out on b	ail or on your own recog	nizance pending trial?
No [] Yes []					
will consider the number of occur	ions or arrests will not autor e nature of the crime, its seri rrences, the applicant's age at l history, employment referer	ousness, the substant t the time of the crime	ial relation to , the time elap	the position's functions used since the crime, the	and qualifications, the applicant's entire work
Have you ever in	nitiated an act of violence in t	he workplace? Yes []] No[]		
	rovide the date(s) and explain you from employment.)	so that individual circ	umstances car	n be considered. (A "Yes"	answer will not neces-
•	ertifications/technical skills the g, fitness certifications, comp		-	, , , , , ,	
	(Address, City, State				
High School					
College					
Bus./Tech./ Trade or Post College					
Honors Received	d				
	t below any other names by w record. For example, change				us to confirm your work

1. All applicants: Do not include convictions that were sealed, eradicated, erased, annulled by a court, or expunged, or convic-

WORK EXPERIENCE Please list the names of your present and/or previous employers in chronological order with present or last employer listed first. Account for all periods of time including any period of unemployment. If self-employed, supply firm name and business references. You may Include any verifiable work performed on a volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for consideration from employment. Employer Name Address Type of Business Telephone () _____ _____ Duties____ Job Title Supervisor's Name_____ May we contact? [] Yes [] No If No, why not?_____ Wages Start_____ Final____ Reason for Leaving_____ What will this employer say was the reason your employment terminated? How much notice did you give when resigning? If none, explain. **Employer** Name Address Type of Business Telephone () Job Title_____ Duties___ Supervisor's Name May we contact? [] Yes [] No If No, why not? Wages Start_____ Final_____ Reason for Leaving______ What will this employer say was the reason your employment terminated?______ How much notice did you give when resigning? If none, explain._____ **Employer** Name Address Type of Business Telephone () Job Title_____ Duties___ Supervisor's Name_____ May we contact? [] Yes [] No If No, why not?_____ Wages Start_____ Final_____ Reason for Leaving______ What will this employer say was the reason your employment terminated? How much notice did you give when resigning? If none, explain._____ Please explain fully all gaps in your employment history in excess of one month. (use back of application if necessary) Have you ever been terminated or asked to resign from any job? [] Yes [] No. If Yes, how many times? Has your employment ever been terminated by mutual agreement? [] Yes [] No If Yes, how many times? Have you ever been given the choice to resign rather than be terminated? [] Yes [] No If Yes, how many times? ____

If you answered Yes to any of the above three questions, please explain the circumstances of each occasion.

REFERENCES

Please list the names of additional work-related references we may contact. Individuals with no prior work experience may list school or volunteer-related references.

NAME	POSITION	COMPANY	WORK RELATIONSHIP	TELEPHONE
			(I.E., SUPERVISOR, CO-WORKER)	

Please list the names of personal references (not previous employers or relatives) who know you well that we may contact.

NAME	OCCUPATION	ADDRESS	TELEPHONE	NUMBER OF YEARS KNOWN

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license for the state in which I reside and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

I understand that the Henderson Family YMCA may now have, or may establish, a drug-free workplace or drug and/or alcohol testing program consistent with applicable federal, state, and local law. If the Henderson Family YMCA has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of the location, pursuant to the Henderson Family YMCA's policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or illegal or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests may be a condition of continual employment and I agree to undergo alcohol and drug testing consistent with the Henderson Family YMCA's policies and applicable federal, state, and local law.

If employed by the Henderson Family YMCA, I understand and agree that the Henderson Family YMCA, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstances, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign a confidentiality, restrictive covenant, and/or conflict of interest statement, as well as an agreement to arbitrate.

I certify that all the information on this application, my resume, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

THE HENDERSON FAMILY YMCA IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT RE-GARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE HENDERSON FAMILY YMCA OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE. NOTHING IN THIS APPLICATION OR IN ANY DOCUMENT OR STATEMENT, WRITTEN OR ORAL, SHALL LIMIT THE RIGHT TO TERMINATE EMPLOYMENT AT-WILL. NO OFFICER, EMPLOYEE OR REPRESENTATIVE OF THE HENDERSON FAMILY YMCA IS AUTHORIZED TO ENTER INTO AN AGREEMENT-EXPRESS OR IMPLIED-WITH ME OR ANY APPLICANT FOR EMPLOYMENT FOR A SPECIFIED PERIOD OF TIME UNLESS SUCH AN AGREEMENT IS IN A WRITTEN CONTRACT SIGNED BY THE PRESIDENT OF THE COMPANY.

IF HIRED, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE COMPANY, AND I UNDERSTAND THAT THE COMPANY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL.

I authorize the Henderson Family YMCA or its agents to confirm all statements contained in this application and/or resume as it relates to the position I am seeking and to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation.

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to the Henderson Family YMCA or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the Henderson Family YMCA and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information.

If hired by the Henderson Family YMCA, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by the Henderson Family YMCA. I also understand the Henderson Family YMCA employs only individuals who are legally eligible to work in the United States.

THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MAXIMUM OF ONE (1) YEAR or 365 DAYS. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.

I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE, ACCURATE, AND COMPLETE.

Applicant Signature		Date	/	/	_
If the applicant is a minor, the foregoing Signature by the applicant's parent or le guardian that the Henderson Family YMO for illegal or controlled substances, concry personnel who need to know, the app	gal guardian constitutes acknowled CA, to the extent permitted by feder duct inspections of property withou	gement by the applical, state, and local to notice, and commit	icant and Iaw, can	the parent of the test the app	or legal licant
Parent/Legal Guardian	Witness				
Date					