



Beaver County YMCA

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

Date _____

Name _____
Last First Middle

Present Address _____
Street City State Zip

Permanent Address _____
Street City State Zip

Phone Number _____ E-Mail _____

Have you ever been employed at the Beaver County YMCA? Yes ___ No ___

If yes, when and for what position _____

Position you are applying for? _____ Date you can start? _____

EDUCATION

Level	Name and Address	No. Years Attended	Did you graduate?	Major/Degree
High school				
College				
College				
Other				

What other special training certifications or special qualifications do you hold?

Have you ever been convicted of a crime in the last seven (7) years? (check) Yes No

If yes, please explain.

PREVIOUS EMPLOYMENT (Start with most recent employee)

Month and Year	Name and Address of employer	Wage	Position	Reason for leaving
From To				
From To				
From To				
From To				

REFERENCES (List three references that are not family members)

Name	Address	Relationship	Phone (with area code)

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that if hired my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice.

Date _____ Signature _____

Interview Notes:

Interviewer _____ Interview Date _____ Hired? Y N