

**LEGACY YMCA  
BESSEMER, ALABAMA**

**APPLICATION FOR EMPLOYMENT**  
(Equal Opportunity Employer)

**PLEASE READ BEFORE COMPLETING THIS APPLICATION**

The Legacy YMCA does not discriminate in the recruitment, hiring, and conditions of employment on the basis of race, color, religion, national origin, sex, marital status, disability, age, or veteran status. No questions on this application are intended to secure information to be used in a discriminatory manner. Your completed application will be reviewed carefully, but its receipt does not imply that you will be employed. Employment consideration necessitates that you meet all minimum qualifications required for the position for which you are applying.

(Answer all Questions completely)

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**PERSONAL DATA**

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Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(First MI Last)

Address: \_\_\_\_\_  
(Street City Zip)

(H#) \_\_\_\_\_ (W#) \_\_\_\_\_ (C#) \_\_\_\_\_

Other names used during prior employment: \_\_\_\_\_  
(Maiden Name, Other Surnames, Etc)

Are you 18 years of age or over Yes \_\_\_\_\_ No \_\_\_\_\_

Are you a Veteran? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you authorized to work in the United States (If you are hired, you will be required to furnish proof of your employment eligibility) Yes \_\_\_\_\_ No \_\_\_\_\_

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**GENERAL**

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Applying for position of \_\_\_\_\_ Acceptable salary range \_\_\_\_\_

Available start date \_\_\_\_\_

If applying for seasonal work, are you available to work during the school term? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you previously applied for employment for any YMCA? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, when? \_\_\_\_\_ Location: \_\_\_\_\_

Have you ever worked for any YMCA? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, when? \_\_\_\_\_ Location: \_\_\_\_\_

How were you referred to the YMCA? (Please circle) Employee Advertisement School Drop-In Agency Other

Name of referral source indicated above \_\_\_\_\_

Have you failed to be reemployed, ever been involuntarily discharged, fired or asked to resign a position?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give dates and circumstances \_\_\_\_\_

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**WORK HISTORY** (List the most recent one first)

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Name of Employer/Organization: \_\_\_\_\_

Employed From: \_\_\_\_\_ to \_\_\_\_\_

Reference Name: \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Briefly describe your responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Name of Employer/Organization: \_\_\_\_\_

Employed From: \_\_\_\_\_ to \_\_\_\_\_

Reference Name: \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Briefly describe your responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Name of Employer/Organization: \_\_\_\_\_

Employed From: \_\_\_\_\_ to \_\_\_\_\_

Reference Name: \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Briefly describe your responsibilities: \_\_\_\_\_  
\_\_\_\_\_

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**EDUCATION**

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Print name, city & state for each school listed	Dates attended	Type of course or major	Graduated	Degree received
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High School

College

Trade, Business/Other

Are you presently in school? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give expected graduation date \_\_\_\_\_

List courses you are taking \_\_\_\_\_

If not a high school graduate, indicate highest grade completed \_\_\_\_\_

If not a high school graduate, have you earned a General Educational Development or high school equivalency?  
Yes \_\_\_\_\_ No \_\_\_\_\_

**PERSONAL REFERENCES**

(Please three personal reference, one of which is a family member)

Name	Address & Phone	Firm Name Address & Phone	Position or Occupation	How Long Known
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List below the names of relatives, friends or acquaintances employed by the Legacy YMCA and their relationship to you

**EMPLOYEE RELEASE FORM**  
**(Please read carefully before signing)**

I hereby certify that the information provided on this application is accurate to the best of my knowledge and subject to verification by the YMCA. I authorize the schools, persons, previous employers, agencies and other organizations named in this application to provide the YMCA (its authorized employees, agents or representatives) with any relevant information that may be required to arrive at an employment decision and hereby release any such schools, persons, employers, agencies and organizations from any and all liability which they might otherwise incur as a result. I understand that any misrepresentation or omission of a material fact on my application may be justification for refusal of employment.

In the event I am employed, I understand that all employees are subject to termination at the discretion of the YMCA. If, in the event I choose to voluntarily terminate my employment, I am free to do so at any time, and, if I choose to give proper notice of termination, the association may either permit me to continue my employment during the notice period or may accept my resignation immediately.

I understand that, in the event I am employed by the YMCA, my compensation, hours of employment and all other terms and conditions of employment are subject to modification or change by the YMCA at the YMCA's discretion.

I also understand that, if employed any misrepresentation made by me completing this application shall be considered as sufficient cause for my dismissal without advance notice.

I authorize the YMCA to supply my employment record, in whole or in part, and in confidence, to any prospective employer, government agency, or other party, with a legal and proper interest.

In the event of my employment, I will comply with all rules and regulations as set forth in the YMCA's policy manual or other communications distributed to employees, and understand a condition of my continued employment will be my compliance with the YMCA's controlled substance abuse and testing policy. I have read, understand and support the YMCA's position on the problem of child abuse.

I also understand that my employment is conditional upon my satisfactorily passing a physical examination and/or drug screening, if one is requested, to be given by a physician or registered nurse selected by the YMCA and until results of my driving record, my criminal history record, reference checks, and other documents required by law are completed, and until information given by me has been verified.

I understand that completion of this form does not guarantee me status as an applicant or any consideration for employment unless I meet all stated minimum qualifications required of the position for which I am asking to be considered.

**CONVICTIONS:** A conviction does not automatically mean you will not be offered a job. What you were convicted of, the circumstances surrounding the conviction and how long ago the conviction occurred are important considerations in determining your eligibility. You may be asked to provide all the facts, so that a fair decision can be made.

**I have read the above statement and accept the same as condition of my employment with the Legacy YMCA.**

\_\_\_\_\_  
**(Signature of Applicant**

\_\_\_\_\_  
**Date)**