



YMCA OF THE EAST BAY
An Equal Opportunity Employer
 Metropolitan Office
 2330 Broadway, Oakland, CA 94612

Application for Employment

Please Type or Print in Ink

Date: _____

Name (print): _____

E-mail Address _____

Address: _____
Number Street Apt. No. City State/Zip

Social Security Number _____

Primary Phone:() _____ Secondary Phone:() _____ Are you at least 18 years old? _____

Employment Desired:

Position: _____ Date Available: _____ Branch/Location preferred: _____

Full time Part time Specify Hrs, Days and Total Hours per week: _____

How did you hear about this job opening? _____

Education & Background:

Check the appropriate box:

High School Diploma GED or High School Equivalency Certificate No Diploma (list highest grade completed)

List Colleges, Universities, Vocational, and/or Business Schools You Attended	Location	Dates Attended	Major/Course of Study	Degree Awarded?	Degree Type	If no degree, list units completed
				Y / N		
				Y / N		
				Y / N		

List Professional Licenses and/or Certificates That You Hold Currently	Date Issued	Date Expires	Number & State	Was license/certification ever revoked or suspended?

Have you ever volunteered or been employed by any YMCA? Yes No If Yes, give location and dates: _____

Other than English, what languages do you read, write and/or speak fluently? _____

Have you ever served in the military? Yes No If Yes, give branch, rank, dates and type of discharge: _____

If hired, can you present proof of US citizenship or proof of your legal right to live & work in the US? Yes No

Are you physically able to perform the essential functions of the job for which you are applying? Yes No

If no, please attach a description of the functions that cannot be performed. In accordance with the Americans with Disabilities Act (ADA), the YMCA seeks reasonable accommodation measures for eligible applicants/employees to perform essential functions.

Have you been convicted of a criminal offense (felony, misdemeanor, or dishonest act)? Yes No

If yes, please attach an explanation providing the date and place of each offense, the specific charge, the date and place of conviction and the fine or sentence received. The following need not be reported: (1) minor traffic violations for which the fine was \$100.00 or less, (2) any offense two years or older settled in a juvenile court or under a welfare youth offender law; (3) any incident that has been sealed under Welfare and Institution Code Section 781 or Penal Code Section 1203.45; (4) marijuana-related offenses that are more than 2 years old. Please be advised that being convicted of any criminal offense does not necessarily disqualify you for employment eligibility. All employment selections will be based upon job related criteria. If you have any questions please contact Human Resources at (510)451-8039

Employment History:

THE FOLLOWING SECTIN MUST BE FILLED OUT COMPLETELY. Begin with the most recent experience and account for ALL time during the past 10 years. Use additional sheets if necessary. Self-employment and periods of unemployment more than 3 months must be listed separately. **This section must be completed whether or not a resume is attached.**

Organization Name/Address/Phone		From: (Mo/Yr)	To: (Mo/Yr)	Starting Pay	Ending Pay	Duties Performed
Supervisor's Name & Phone	Hrs. Week	Reason for leaving:				May we contact your current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Organization Name/Address/Phone		From: (Mo/Yr)	To: (Mo/Yr)	Starting Pay	Ending Pay	Duties Performed
Supervisor's Name & Phone	Hrs. Week	Reason for leaving:				
Organization Name/Address/Phone		From: (Mo/Yr)	To: (Mo/Yr)	Starting Pay	Ending Pay	Duties Performed
Supervisor's Name & Phone	Hrs. Week	Reason for leaving:				
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Supervisor's Name & Phone	Hrs. Week	Reason for leaving:				

I UNDERSTAND that YMCA policy prohibits unlawful discrimination based on race, color, creed, sex, marital status, pregnancy, age, national origin, ancestry, sexual orientation, disability, medical condition, or any other consideration deemed unlawful. The YMCA is an at-will employer, and the employment relationship may be ended by either party at any time with or without cause and/or notice. All employees are required to be *fingerprinted* for a check of convictions (per Title V and section PS11105.3). The YMCA may require *pre-employment drug tests* for any job opening.

I AUTHORIZE the YMCA to thoroughly investigate my references, work record, criminal record, education, and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the YMCA any and all information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the YMCA, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

I CERTIFY that the statements made by me in this application are true, complete and correct to the best of my knowledge and belief and are made in good faith. I understand and agree that misstatements or omission of material fact(s) may be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Should a search of public records (including criminal records, civil judicial action, etc.) be conducted by the YMCA, I am entitled to copies of any such records obtained unless I mark this box:
 If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box above.

 Applicant Signature

 Date

May we contact your current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
