

TODAY'S DATE _____

**LAKELAND HILLS FAMILY YMCA
100 FANNY ROAD
MT. LAKES, NEW JERSEY 07046
(973) 334-2820**

LAKELAND HILLS FAMILY YMCA IS AN EQUAL OPPORTUNITY EMPLOYER
AND WILL NOT DISCRIMINATE ON THE BASIS OF ANY LEGALLY PROTECTED STATUS.

PERSONAL INFORMATION

NAME _____
last first middle initial

ADDRESS _____
street city state zip code

TELEPHONE _____ SOCIAL SECURITY NO. _____
area code & number

ARE YOU EITHER 18 YEARS OF AGE OR IN POSSESSION OF A WORK PERMIT?

YES _____ NO _____

ARE YOU EITHER A U.S. CITIZEN OR AN ALIEN WHO IS AUTHORIZED TO WORK IN THE U.S.?

YES _____ NO _____

(IF YOU ANSWER "YES", YOU MUST COMPLETE THE I-9 FORM REQUIRED BY THE U.S.
IMMIGRATION AND NATURALIZATION SERVICE NO LATER THAN THREE (3) BUSINESS DAYS
AFTER YOUR DATE OF HIRE.)

EMPLOYMENT DESIRED

POSITION FOR WHICH YOU ARE APPLYING: _____

FULL-TIME _____ PART-TIME _____ TEMPORARY _____ VOLUNTEER _____

DATE OF AVAILABILITY _____

ARE YOU AVAILABLE TO WORK OVERTIME? YES _____ NO _____
(YOU ARE NOT REQUIRED TO ACCOUNT FOR THE NEED FOR TIME OFF DUE TO RELIGIOUS PREFERENCE.)

BACKGROUND

HAVE YOU EVER APPLIED FOR EMPLOYMENT WITH THIS COMPANY? _____

WHEN? _____

WERE YOU EVER EMPLOYED BY THIS COMPANY _____ WHEN? _____

IN WHAT POSITION? _____

PLEASE DESCRIBE _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME?

YES _____ NO _____

(A CONVICTION WILL NOT NECESSARILY BE A BAR TO EMPLOYMENT. PLEASE DESCRIBE THE NATURE OF THE CONVICTION, THE DATE OF THE CONVICTION AND YOUR REHABILITATION SINCE YOUR CONVICTION.)

EDUCATION	SCHOOL NAME & ADDRESS	MAJOR OR COURSE OF STUDY	HIGHEST GRADE COMPLETED
HIGH SCHOOL			
COLLEGE			
GRADUATE			
OTHER			

REFERENCES

NAME AND OCCUPATION

ADDRESS

PHONE NUMBER

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

FORMER EMPLOYERS

LIST BELOW YOUR WORK EXPERIENCE (STARTING WITH YOUR PRESENT OR MOST RECENT EMPLOYER) FOR THE LAST FIVE YEARS OR YOUR LAST THREE EMPLOYERS, WHICHEVER WILL PROVIDE US WITH THE MOST INFORMATION ABOUT YOU. USE THE REVERSE SIDE OF THE APPLICATION IF YOU NEED ADDITIONAL SPACE. PLEASE ACCOUNT FOR ALL PERIODS OF UNEMPLOYMENT IN THIS SECTION. WE MAY BE CHECKING PAST EMPLOYERS AS REFERENCES.

MAY WE CONTACT YOUR PRESENT EMPLOYER AT THIS TIME? YES _____ NO _____

DATE EMPLOYED	NAME, ADDRESS & PHONE # OF EMPLOYER	NAME OF SUPERVISOR	STARTING POSITION	ENDING POSITION & SALARY	REASON FOR LEAVING
FROM					
TO					
FROM					
TO					
FROM					
TO					
FROM					
TO					
FROM					
TO					

PLEASE LIST ANY OTHER JOB RELATED EXPERIENCE, SKILLS, OR ACTIVITIES, INCLUDING UNITED STATES MILITARY SERVICE EXPERIENCE, NOT DESCRIBED ABOVE, WHICH YOU WOULD LIKE US TO CONSIDER IN EVALUATING YOUR QUALIFICATIONS FOR THE POSITION SOUGHT. (YOU ARE NOT REQUIRED TO LIST ANY INFORMATION WHICH MAY TEND TO REVEAL A PROTECTED CHARACTERISTIC AS SET FORTH IN THE EEO STATEMENT ABOVE.)

APPLICANT’S STATEMENT

I understand that my misstatement, omission or misleading information given in my application or interview or in connection with other Company records may result in the rejection of my application, the withdrawal of any offer of employment or my dismissal from employment.

I authorize an investigation of all statements contained in this application for employment.

I authorize the release of my motor vehicle report if I drive YMCA vehicles.

I release from all liability and responsibility all persons and entities, requesting or supplying information about my information provided on this application, including my present employer.

I understand that if employed by the Lakeland Hills Family YMCA, I will be an employee at-will, which means that I can voluntarily end my employment or be terminated at any time for any reason or no reason at all. No statement whether written or oral, by my Company representative other than a written statement signed by the President may vary the foregoing.

DATE

SIGNATURE OF APPLICANT

NAME: _____

POSITION: _____

AFTER DISCUSSING THE POSITION FOR WHICH
YOU HAVE APPLIED WITH A LAKELAND HILLS
FAMILY YMCA REPRESENTATIVE AND/OR
REVIEWING THE ASSOCIATED JOB DESCRIPTION,
PLEASE ANSWER THE FOLLOWING QUESTION:

ARE YOU ABLE TO PERFORM ALL OF THE JOB
FUNCTIONS?

YES _____ NO _____