



**FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

We are an Equal Opportunity Employer. Applicants for all job openings are welcome and will be considered without regard to race, color, religion, national origin, sex, age, sexual orientation, physical or mental disability, or any other basis protected by state, federal or local law. It is the intent of Two Rivers YMCA to comply with all applicable federal, state and local legislation concerning equal opportunity in employment.

**To help us learn about your experience, abilities, and interests,
please complete this Application for Employment as thoroughly as possible.**

PERSONAL INFORMATION (please print or type)

| | | |
|--|--|--|
| NAME: | Social Security No. | Home Telephone No. |
| ADDRESS: Street Number & Name, City, State, Zip Code | Number of years at present address? | Cell Phone No. |
| PREVIOUS ADDRESS: Street Number & Name, City, State, Zip | Number of years at previous address: | Email Address |
| Can you, after employment, submit verification of your legal right to work in the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO | Are you over 18? <input type="checkbox"/> YES <input type="checkbox"/> NO | If hired, do you have reliable means of transportation to get to work? <input type="checkbox"/> YES <input type="checkbox"/> NO |

Have you ever been convicted of a felony, or for child abuse or sex-related crimes? (Do not include marijuana related convictions which occurred more than two years prior to the date of this application.)

YES NO

If yes, please explain: (A conviction will not necessarily disqualify you.)

Are you able to perform all of the tasks associated with the position for which you are applying?

YES NO

TWO RIVERS YMCA

2040 53rd Street

Moline, IL 61265

P 309 797 3945 F 309 797 7966

W tworiversymca.org

EMPLOYMENT DATA

Please list in order of most recent employment first.

| | | |
|--------------|------------------|--|
| Company Name | Phone No. () | Dates of Employment From (Mo./Yr.) to (Mo./Yr.) |
|--------------|------------------|--|

Reason for Leaving

Address (Include Street, City, State, Zip Code)

| | | | |
|-------------------|-------------------|------------------|-------|
| Job Title - Start | Job Title - Final | Base Rate of Pay | |
| | | Start | Final |

Supervisor (Name & Title)

Description of Job Duties

| | | |
|--------------|------------------|--|
| Company Name | Phone No. () | Dates of Employment From (Mo./Yr.) to (Mo./Yr.) |
|--------------|------------------|--|

Reason for Leaving

Address (Include Street, City, State, Zip Code)

| | | | |
|-------------------|-------------------|------------------|-------|
| Job Title - Start | Job Title - Final | Base Rate of Pay | |
| | | Start | Final |

Supervisor (Name & Title)

Description of Job Duties

| | | |
|--------------|------------------|--|
| Company Name | Phone No. () | Dates of Employment From (Mo./Yr.) to (Mo./Yr.) |
|--------------|------------------|--|

Reason for Leaving

Address (Include Street, City, State, Zip Code)

| | | | |
|-------------------|-------------------|------------------|-------|
| Job Title - Start | Job Title - Final | Base Rate of Pay | |
| | | Start | Final |

Supervisor (Name & Title)

Description of Job Duties

REFERENCE DATA

Please list four personal and two family references.

| | | |
|--------------------|---------|-------|
| Name | Address | Phone |
| Name | Address | Phone |
| Name | Address | Phone |
| Name | Address | Phone |
| Family Member Name | Address | Phone |
| Family Member Name | Address | Phone |

STATEMENT OF APPLICANT/PRE-EMPLOYMENT CERTIFICATION

I understand that this application is only valid for the position applied for at present and that the Two Rivers YMCA is not obligated to retain or consider this application for future openings.

I understand that the YMCA attempts to attract the highest quality of staff. I have been advised that as a part of the application process for employment with the YMCA, an extensive inquiry may be conducted concerning my prior employment, activities, character, and health. I fully consent to and authorize all such inquiries.

I also confirm that all statements contained in this application are true and complete to the best of my knowledge. I understand that falsification, misrepresentation or omission of facts called for will result in immediate termination from employment or removal of my application for consideration.

In the event of my employment by the YMCA, I will comply with all policies set forth in the personnel manual and with other policies established from time to time by the organization. I authorize the YMCA to request my employment record from any former employer(s). I further understand that inquiries may be made, concerning me, my background, experience and prior employment at any time prior to, during or after my employment. Inquiries may be made by you, or your representatives, to any governmental agency, including law enforcement agencies or departments, or any other party with a legal and proper interest. I hereby waive any right to claim that any request or investigation is an invasion of my privacy, since they are made with my consent and it is in my interest that I be considered for employment or continued employment.

I agree to submit to legally permissible drug and/or alcohol testing upon request by Two Rivers YMCA. I recognize that the results of these tests may be used to determine my employment or continued employment. I understand and agree that if employed by Two Rivers YMCA, storage areas provided for me (locker, desk, etc.), are open to investigation by the YMCA without prior notice to me.

I understand and agree that if I am employed, there is no contract period for employment and my employment would be solely an "employment at will." This would give either me or the YMCA the right to terminate my employment at any time without liability or obligation except for my regular pay through date of termination.

I agree to be bound by the terms and conditions stated in this application. This application contains all the understandings and agreements between me and the Two Rivers YMCA concerning the nature of my employment, if any, by the Two Rivers YMCA and supersedes all prior and/or contemporaneous practices, oral or written agreements, understandings, statements, representations and promises, expressed or implied, between me and the Two Rivers YMCA. I understand and agree that, except as noted above, no person who is either an agent or employee of the Two Rivers YMCA may modify, delete, vary, or contradict, whether orally or in writing, the terms and conditions set forth herein.

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD THE ABOVE STATEMENTS AND THAT I VOLUNTARILY SIGN THIS APPLICATION.

Applicant Signature

Date