



# EMPLOYMENT APPLICATION

Stevens Point Area YMCA  
1000 Division Street  
Stevens Point, WI 54481

Phone: 715-342-2980  
Fax: 715-342-2987  
Website: www.spymca.org

*The Stevens Point Area YMCA is an equal opportunity employer, we welcome a diverse workforce.*

**\*All items on application must be completed. Incomplete applications will be discarded.**

## GENERAL INFORMATION

Name \_\_\_\_\_

Application Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Present Address \_\_\_\_\_

E-Mail \_\_\_\_\_

\_\_\_\_\_

Present Phone \_\_\_\_\_

Permanent Address \_\_\_\_\_

\_\_\_\_\_

Permanent Phone \_\_\_\_\_

Are you at least 18 years old?  Yes  No ~ if no, please provide your date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Emergency Contact Name \_\_\_\_\_

Phone \_\_\_\_\_

*Person to be notified in case of emergency*

Have you ever been convicted of a crime (felony or misdemeanor)?  Yes  No

If yes, explain 1) the nature of the crime, 2) the date of conviction and 3) the state in which convicted.

*Please note that convictions are not an automatic bar to employment. However, failure to provide complete and accurate information relating to criminal convictions is cause for immediate termination. Employment is contingent upon the results of a criminal record check.*

1) \_\_\_\_\_

2) \_\_\_\_/\_\_\_\_/\_\_\_\_ 3) \_\_\_\_\_

## EMPLOYMENT DESIRED ~ Please indicate ALL departments you would like to be considered for.

- Health & Fitness     Gymnastics     Facility Service     Adaptive Recreation
- Youth Sports     Customer Service     Youth/Teen Recreation     Clerical Support
- School Age Care     Aquatics     Early Childhood/Preschool     Drop-In Child Care

Specific Position(s) applying for \_\_\_\_\_

Availability (Please mark all that apply)

Part-time     Full-time

Year-round     Summer     School-Year

Date you can begin \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please show availability in the table below. If you are a student a school schedule must be attached.**

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Have you applied here before?  Yes  No If yes, when? \_\_\_\_\_

Have you been an employee or a volunteer here?  Yes  No If yes, when? \_\_\_\_\_

## EDUCATION & CERTIFICATIONS

Type of School	Name, City & State	Years Completed	Graduated	Diploma, Degree, Course of Study
High School				
College				
Post Graduate				
Business or Trade				

- Lifeguard Certification ~ Type \_\_\_\_\_ ~ Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_
- CPR Certification ~ Type \_\_\_\_\_ ~ Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_
- First Aid Certification ~ Type \_\_\_\_\_ ~ Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_
- Other ~ Type \_\_\_\_\_ ~ Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**\*Please attach a copy of any current certifications\***

## INTERESTS & QUALIFICATIONS

Please explain why you want to work for the Stevens Point Area YMCA.

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Please explain why you are interested in the specific position(s) you are applying for.

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Please explain what makes you feel you are qualified for the specific position(s) are applying for.

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**EMPLOYMENT EXPERIENCE** ~ Please list employers in chronological order with most recent first, and include military service assignments and volunteer activities.

Employer	Telephone	Dates Employed
Address	City, State Zip	
Job Title	Wage – Starting	Wage – Final
Work Performed	Supervisor	
Reason for Leaving	May we contact?	

## EMPLOYMENT EXPERIENCE CONTINUED

Employer	Telephone	Dates Employed
Address	City, State Zip	
Job Title	Wage – Starting	Wage – Final
Work Performed	Supervisor	
Reason for Leaving	May we contact?	

Employer	Telephone	Dates Employed
Address	City, State Zip	
Job Title	Wage – Starting	Wage – Final
Work Performed	Supervisor	
Reason for Leaving	May we contact?	

Employer	Telephone	Dates Employed
Address	City, State Zip	
Job Title	Wage – Starting	Wage – Final
Work Performed	Supervisor	
Reason for Leaving	May we contact?	

## REFERENCES ~ Please list three persons, whom you have known for at least one year. Include one relative.

Name	Day Telephone	Evening Telephone
Address	City, State Zip	
Occupation/Relationship	Years Known	

Name	Day Telephone	Evening Telephone
Address	City, State Zip	
Occupation/Relationship	Years Known	

Name	Day Telephone	Evening Telephone
Address	City, State Zip	
Occupation/Relationship	Years Known	

## APPLICATION PROCESS & POLICY

In accordance with our policy to recruit and hire on an equal opportunity basis without regard to race, creed, color, religion, sex, age, national origin, sexual preference, disability, veteran status, or any other characteristics protected by law, the Stevens Point Area YMCA adheres to the following job applicant policies and procedures:

1. Applications may be submitted in person, mailed, faxed, or electronically mailed.
2. Resumes must be accompanied by this completed Employment Application.
3. Incomplete applications will not be accepted.
4. At times we may limit the number of accepted applications for highly solicited positions on a first-come, first-served basis. The number of applications accepted will be determined by the position.
5. Applications will be considered as active for four calendar months following the original application date.
6. Only accepted applications that are considered active will be forwarded to the hiring Director(s).
7. Accepted, active applications for open positions will be forwarded to the hiring Director(s) for consideration and interview scheduling.

## STATEMENT OF APPLICANT ~ Please read this carefully before signing this form

1. All information contained in this application is true and correct to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired.
2. I authorize the Stevens Point Area YMCA to investigate my background and responses on this application and to contact present and former employers (except as indicated) or any individuals familiar with me or my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information, whether favorable or unfavorable, about me or my employment. I voluntarily and knowingly fully release and hold harmless any person or organization that provides information pertaining to me, or my employment.
3. Regardless of whether or not I become employed by the Stevens Point Area YMCA, I recognize that this application is not and should not be considered a contract of employment. I understand that employment at the Stevens Point Area YMCA is on an at-will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or at the option of the Stevens Point Area YMCA.

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**Date**

Optional:

How did you learn about the position(s) that you are applying for (please check all that apply):

- Stevens Point Area YMCA website    National YMCA Vacancy List    WI JobNet  
 UWSP website or e-mail    Tech Connect    Newspaper ad    Job fair    Newspaper ad  
 Inquiry to YMCA    YMCA employee    Word of mouth  
 Other: \_\_\_\_\_