



We build strong kids  
strong families  
strong communities

# YMCA of Greater Syracuse

## Application for Employment

### Branch Locations

Downtown Syracuse YMCA  
340 Montgomery Street  
Syracuse, NY 13202  
315 474-6851

North Area Family YMCA  
4775 Wetzel Road  
Liverpool, NY 13090  
315 451-2562

East Area Family YMCA  
200 Towne Drive  
Fayetteville, NY 13066  
315 637-2025

Arts Branch  
340 Montgomery Street  
Syracuse, NY 13202  
315 474-6851

Baldwinsville Family YMCA  
2725 West Entry Road  
Baldwinsville, NY 13027  
315 635-1050

Camp Iroquois  
4795 Sweet Road  
Manlius, NY 13104  
315 637-6436

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

### General Information

Please print and answer all questions completely

Last Name		First Name		M
Address (Number & Street)		City	State	Zip Code
Contact Information Day Time Phone #: _____ Evening Phone #: _____ Email Address: _____			How long have you resided at this address? <small>(voluntary response)</small> _____ Are you presently employed? Yes      No	
Date you would be available to work: ____/____/____	Are you at least 18 years of age?    Yes      No If you are under 18 years of age, can you provide the required working papers? Yes      No			
Position(s) applying for:	Are you legally eligible to work in the U.S.?    Yes      No (Proof of U.S. Citizenship or immigration status will be required upon employment.)			
Applying for position as: Full time Part time Camp, or    Seasonal	Have you ever been employed by the YMCA of Greater Syracuse before? Yes      No    If yes, give dates and location: _____			
Please circle the day(s) of the week you are available to work: Sun. Mon. Tues. Wed. Thu. Fri. Sat.	Will you be able to perform the essential functions of the job for which you are applying in a reasonable manner without an accommodation?    Yes      No If no, describe the type of job accommodation you will need: _____			
Please circle the shift you are available to work: Day    Afternoon    Evening	Do you have any relatives working for the YMCA of Greater Syracuse? Yes      No    If yes, provide name and relationship: _____			
Have you ever been convicted of a crime (felony or misdemeanor)?    Yes      No    If yes, please explain the nature of the crime, date(s) of conviction and city, state and county where conviction occurred: _____				
<small>A conviction will not necessarily disqualify you from consideration. However, failure to provide complete and accurate information relating to criminal convictions will result in immediate termination. The YMCA will conduct a criminal record check on all employees. Employment is contingent upon the results of the criminal record check. Give all the facts, so that a fair decision can be made.</small>				

**THE YMCA OF GREATER SYRACUSE IS AN EQUAL OPPORTUNITY EMPLOYER**

The YMCA of Greater Syracuse is an Equal Opportunity Employer and will not discriminate, against any employee or applicant based on race, color, religion, gender, national origin, age, veteran status, marital status, disability or any other status protected under federal, state or local laws.

## Education, Certifications and Training

Type of School	Name & Address of School	Course of Study Type of Degree	No. Years Completed	Graduate? (Check One)
High School	Name: _____ Address: _____			Yes    No
College/University	Name: _____ Address: _____			Yes    No
Other	Name: _____ Address: _____			Yes    No
Highest Degree of Education Received Circle one number only: 1. High School    2. Associate    3. Bachelor    4. Master    5. Doctorate				Overall College GPA _____
List any additional education, technical/vocational and/or professional certifications, volunteer work or honors you have received which you would consider relevant to your ability to perform the job you are seeking. (Do not list any which reflect your race, color, religion, gender, national origin, age, veteran or marital status or disabilities.)				
List any current special license(s), permit(s), certification(s) and level or credited hours (e.g. CPR, Lifeguard, First Aid, Fitness Training, etc.- Proof of these accomplishments will be required, if hired.)				
Type		Level		Expiration Date
List any equipment, machinery, software or special skills relative to your ability to perform the functions of the position for which you are applying. Include your skill level and years of experience.				
U.S. Military Service				
Branch of Service		Technical Specialization		Rank Attained
Did you receive an honorable discharge?    Yes    No    If no, please explain: _____				

## References

List three professional references that are not past employers (other than relatives)			
	1	2	3
Name			
Address			
Telephone No.			
Position or Occupation			
How long known and relationship			

## Employment History

List employment history starting with your most recent position then list all other jobs in sequence.  
 First time job seekers, please list volunteer activities, starting with the most recent.  
 If a resume is provided, the employment history section must still be completed.

Dates of Employment	Employer Name, Address & Telephone #	Job Title & Immediate Supervisor	Wages	Reason for Leaving	May we Contact? Yes No
<b>1.</b> Present Position  From _____ (Mo/Yr) To _____ (Mo/Yr)	Name: _____  Address: _____ _____ Phone #: (____) ____ - ____	Job Title: _____  _____ Immediate Supervisor: _____ _____	Starting Rate \$ _____ per _____  Current \$ _____ per _____		Yes No
<b>2.</b>  From _____ (Mo/Yr) To _____ (Mo/Yr)	Name: _____  Address: _____ _____ Phone #: (____) ____ - ____	Job Title: _____  _____ Immediate Supervisor: _____ _____	Starting Rate \$ _____ per _____  Current \$ _____ per _____		Yes No
<b>3.</b>  From _____ (Mo/Yr) To _____ (Mo/Yr)	Name: _____  Address: _____ _____ Phone #: (____) ____ - ____	Job Title: _____  _____ Immediate Supervisor: _____ _____	Starting Rate \$ _____ per _____  Current \$ _____ per _____		Yes No
<b>4.</b>  From _____ (Mo/Yr) To _____ (Mo/Yr)	Name: _____  Address: _____ _____ Phone #: (____) ____ - ____	Job Title: _____  _____ Immediate Supervisor: _____ _____	Starting Rate \$ _____ per _____  Current \$ _____ per _____		Yes No
<b>5.</b>  From _____ (Mo/Yr) To _____ (Mo/Yr)	Name: _____  Address: _____ _____ Phone #: (____) ____ - ____	Job Title: _____  _____ Immediate Supervisor: _____ _____	Starting Rate \$ _____ per _____  Current \$ _____ per _____		Yes No

## **Applicant's Certification and Agreement**

Please Read the following very carefully

I hereby certify that the information I have given on this application is true and complete to the best of my knowledge.

I understand that falsification, misrepresentation or omission of facts requested in this application will be sufficient cause to (1) cancel further consideration of this application, or (2) immediate discharge from the employer's service whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees, or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and release each such employer or other person, firm or corporation from any and all liability by reason of furnishing the requested information.

In the event of employment, I understand and acknowledge that, unless otherwise defined by applicable law, my employment is not for a specified term but rather is of an "at will" nature, and that my employment may be terminated with or without cause and with or without notice at the option of either myself or the Employer at any time. I understand that no representative of the YMCA of Greater Syracuse has the authority to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the Chief Executive Officer.

I understand that if an employment offer is extended to me and I accept that I will fully adhere to the policies, rules and regulations of employment of the Employer, additionally, I agree to hold in strictest confidence any confidential information concerning the Company. I also understand that if hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Employment Eligibility Form.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable federal, state or local law.

I understand that this application for employment shall be considered active for a 90-day period. Any applicant wishing to be considered for employment beyond this time period will have to reapply and complete a new application.

### **Do not sign until you have read the above statements.**

I hereby certify that I have read and understood the above statement and that I voluntarily sign this application.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

### **Pre-Employment Background Investigation Inquiry Release**

As part of the pre-employment hiring process, I understand that the YMCA of Greater Syracuse requires the successful completion of a thorough background check, which includes, but is not limited to obtaining any record of convictions from law enforcement agencies and requesting consumer reports from a consumer-reporting agency. I agree to provide additional information by completing a supplemental Statement of Application form to process my employment application. I further agree to authorize without reservation any party or agency contacted by IntelliCorp Records, Inc to furnish the YMCA of Greater Syracuse with the results of a thorough background check.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date