



YMCA Seven Council Fires

Employment Application

YMCA Seven Council Fires is an Equal Opportunity Employer. We are committed to strengthening our community through youth development, healthy living, and social responsibility.

PERSONAL INFORMATION

Full Name: _____ **Date:** _____
(First) (Middle) (Last)

Address:

Street Address / Apt or Suite

City | State | Zip Code

Email: _____ **Phone:** _____

Position Applied For:

Date Available: _____

Employment Desired:

- Full-Time
- Part-Time
- Seasonal

Completed applications can be turned into Brittany Brooks, Associate Executive Director.
Brittany@ymcafires.org

EMPLOYMENT ELIGIBILITY

Are you legally eligible to work in the United States?

Yes No

Have you ever worked for the YMCA Seven Council Fires before?

Yes No

If yes, list dates: _____

Have you ever been convicted of a felony?

Yes No

If yes, please explain:

EDUCATION

High School

School Name: _____ City/State: _____

From: _____ To: _____

Graduate? Yes No

Diploma: _____

College

School Name: _____ City/State: _____

From: _____ To: _____

Graduate? Yes No

Degree: _____

Other Education / Certifications

School Name: _____ City/State: _____

From: _____ To: _____

Degree/Certification: _____

PREVIOUS EMPLOYMENT

Employer 1

Company/Individual: _____

Email: _____ Phone: _____

Address: _____

Starting Pay: \$ _____ Hour Salary

Ending Pay: \$ _____ Hour Salary

Job Title: _____

Responsibilities: _____

From: _____ To: _____

Reason for Leaving:

Employer 2

Company/Individual: _____

Email: _____ Phone: _____

Address: _____

Starting Pay: \$ _____ Hour Salary

Ending Pay: \$ _____ Hour Salary

Job Title: _____

Responsibilities: _____

From: _____ To: _____

Reason for Leaving:

Employer 3

Company/Individual: _____

Email: _____ Phone: _____

Address: _____

Starting Pay: \$ _____ Hour Salary

Ending Pay: \$ _____ Hour Salary

Job Title: _____

Responsibilities: _____

From: _____ To: _____

Reason for Leaving:

REFERENCES

Professional Reference (1 Required)

Full Name: _____

Relationship: _____

Company/Organization: _____

Title/Position: _____

Email: _____ Phone: _____

Personal Reference

Full Name: _____

Relationship: _____

How do you know this person? _____

Email: _____ Phone: _____

Personal Reference

Full Name: _____

Relationship: _____

How do you know this person? _____

Email: _____ Phone: _____

MILITARY SERVICE

Are you a veteran?

Yes No

Branch: _____

Rank at Discharge: _____

From: _____ To: _____

Type of Discharge: _____

If not honorable, please explain:

BACKGROUND CHECK CONSENT

If asked, are you willing to consent to a background check?

Yes No

DISCLAIMER

YMCA Seven Council Fires is an Equal Opportunity Employer committed to excellence through diversity. Please complete each section of this application even if attaching a resume.

I certify that the information provided in this application is true and complete to the best of my knowledge. I understand that providing false or misleading information may result in denial of employment or termination if hired.

Signature: _____

Date: _____

Print Name: _____