

APPLICATION FOR EMPLOYMENT

YMCA OF COLUMBIA, SC



- Downtown YMCA 1420 Sumter Street, 803.799.9187
- Jeep Family YMCA at Lake Carolina, 900 Lake Carolina Drive 803.451.8439
- Lexington Family YMCA, 401 YMCA Road 803.359.3376
- NorthWest Family YMCA, 1501 Kennerly Road 803.407-8007
- Orangeburg County YMCA, 2550 St. Matthews Road 803.268.9622

DISCLAIMER:

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

The YMCA of Columbia, SC is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status.

ALL EMPLOYEES OF COLUMBIA YMCA ARE EMPLOYED AT-WILL AND MAY RESIGN/QUIT OR BE TERMINATED AT ANY TIME AND FOR ANY REASON. NOTHING IN ANY OF COLUMBIA YMCA'S RULES, POLICIES, HANDBOOKS, PROCEDURES OR OTHER DOCUMENTS RELATING TO EMPLOYMENT CREATES ANY EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT. NO PAST PRACTICES OR PROCEDURES, WHETHER ORAL OR WRITTEN, FORM ANY EXPRESS OR IMPLIED AGREEMENT TO CONTINUE SUCH PRACTICES OR PROCEDURES. NO PROMISES OR ASSURANCES, WHETHER WRITTEN OR ORAL, WHICH ARE CONTRARY TO OR INCONSISTENT WITH THE LIMITATIONS SET FORTH IN THIS PARAGRAPH CREATES ANY CONTRACT OF EMPLOYMENT UNLESS: 1) THE TERMS ARE PUT IN WRITING, 2) THE DOCUMENT IS LABELED "CONTRACT," 3) THE DOCUMENT STATES THE DURATION OF EMPLOYMENT, AND 4) THE DOCUMENT IS SIGNED BY THE CEO.

APPLICANT INFORMATION:

Last Name				First		M.I.	Date	
Street Address						Apartment/Unit #		
City				State		ZIP		
Phone				E-mail Address				
Date Available				Full Time or Part Time				Desired Salary
Position Please circle:	Aerobics Instructor, Child Care, Lifeguard, Maintenance, Pre School, Membership, Wellness or Other							
Days and Times Available:	Sunday, Monday, Tuesday, Wednesday, Thursday, Friday, Saturday					A.M. or P.M.		
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work:			YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Have you ever worked for the YMCA?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?					
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain					

EDUCATION AND CERTIFICATIONS:

High School				Address				
Did you graduate?	YES <input type="checkbox"/>			NO <input type="checkbox"/>				
College				Address				
From	To			Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
Other Certifications and Skills:					Aerobic, Aquatic or Personal Trainer Certification:			
CPR & AED	Adult	Child	First Aid	Expiration:				

MILITARY SERVICE:

Branch				From		To	
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PREVIOUS EMPLOYMENT

Company					Phone	()	
Address					Supervisor		
Job Title				Starting Salary	\$	Ending Salary	\$
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Company					Phone	()	
Address					Supervisor		
Job Title				Starting Salary	\$	Ending Salary	\$
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Company					Phone	()	
Address					Supervisor		
Job Title				Starting Salary	\$	Ending Salary	\$
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		

REFERENCES:

Full Name					Relationship		
Company					Phone	()	
Address							
Full Name					Relationship		
Company					Phone	()	
Address							
Full Name					Relationship		
Company					Phone	()	
Address							

Please sign and date after you have completed the application.

SIGNATURE					DATE:		
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