



# Bloomington-Normal YMCA

602 South Main Street  
Bloomington, IL 61701  
(309) 827-6233 www.bnymca.org

# APPLICATION FOR EMPLOYMENT

**Mission:** To put Christian principles into practice through programs that build healthy spirit, mind and body for all.

## GENERAL INFORMATION

Today's Date \_\_\_ / \_\_\_ / \_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Birthdate if under age 18 \_\_\_ / \_\_\_ / \_\_\_ Are you a student ? YES NO

Have you ever entered a plea of guilty to, been convicted of or forfeited bond in relation to a felony or dishonest act? YES NO

Are you available for employment in the United States? YES NO

## EMPLOYMENT DESIRED

For what position? \_\_\_\_\_ Part-time \_\_\_ Full-time \_\_\_

Can you perform the job with or without accommodations? YES NO

What special qualifications do you have?

\_\_\_\_\_  
\_\_\_\_\_

Date you can start \_\_\_\_\_ Desired wage \_\_\_\_\_

Are you currently employed? YES NO If yes, may we contact your employer? YES NO

Supervisor's Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Company \_\_\_\_\_ Address \_\_\_\_\_

## HOURS AVAILABLE

PLEASE USE THIS TABLE TO SHOW WHAT DAYS AND HOURS YOU ARE AVAILABLE FOR WORK.

		Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<b>DAYS</b>		YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
<b>HOURS</b>	FROM							
	UNTIL							

## EDUCATION

	Name & Address	Years Attended	Year Graduated	Major Subjects Studied
High School				
College				
Graduate School				
Other				

## EMPLOYMENT HISTORY

Dates Employed	Employer Name Address, Phone	Starting Wage	Ending Wage	Position	Reason for Leaving
1. Start		\$	\$		
End		per	per		
2. Start		\$	\$		
End		per	per		
3. Start		\$	\$		
End		per	per		

## REFERENCES

	Name	Address	Phone	Profession	Years Acquainted
1.					
2.					
3.					

### PLEASE READ THIS CAREFULLY BEFORE SIGNING

I give permission to the Bloomington-Normal YMCA to investigate any information related to my possible future employment, including a background check. I agree that any false statement on this application shall be sufficient cause for rejection or dismissal. I certify that the statements and answers given on this application are true and complete and that I have not knowingly failed to disclose any material facts. Following an offer of employment I also agree to submit to a medical examination, if requested to do so.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_