

# EMPLOYMENT APPLICATION

Thank you for your interest in working at the Skagit Valley Family YMCA

- The Y is an equal employment opportunity employer and does not discriminate in the recruitment, hiring or promotion on the basis of any characteristic protected by applicable local, state, or federal law, including but not limited to race, color, religion, sex, gender or expression, disability, national origin or age.
- Due to licensing requirements, some positions require employees to be 21 or over.
- If you would like apply to join the Y team the application below must be completed in full.

## PERSONAL INFORMATION

Position Desired:

Date Available:

Interested in:  Full-time  Part-time  Temporary/Seasonal

Day/Hour Availability:

Name:

Are you 18 years of age or older?

yes  no

Street Address:

Email:

City, State, Zip:

Cell phone:

Alternate Phone:

Have you ever been employed or volunteered with the YMCA?  yes  no

If Yes: Month/ Year

Branch:

Are you eligible to work in the United States?  yes  no

Do you have relatives employed by this YMCA? If yes, name:

Employee Referral:

Explain why you desire to work at the YMCA.

What qualifications do you have that would make you a good candidate for the position which you are applying?

Describe any non-employment experience such as school or volunteer activities that might strengthen your application.

Describe any additional skills, training, interests, hobbies, or non-English languages spoken.

Please list all current safety & job certifications:

### SKAGIT VALLEY FAMILY YMCA

215 E Fulton Street, Mount Vernon, WA 98273  
P 360 336 9622 F 360 336 9624 W skagitymca.org

WE'RE FOR: YOUTH DEVELOPMENT, HEALTHY LIVING, & SOCIAL RESPONSIBILITY





Please explain any gaps in employment

**References:** list names of those able to give character references.  
Do not include relatives or former employers listed above.

Name	Relationship	Years known
Address	Phone	Email
Name	Relationship	Years known
Address	Phone	Email
Name	Relationship	Years known
Address	Phone	Email

**Application Acknowledgement and Authorization**

**Notice to all Applicants: The YMCA enforces its policies and practices to prevent child abuse.**

I authorize both the YMCA and persons listed (references, schools, current (unless noted) and former employers and any others with whom you desire to check) to communicate with regard to any relevant information that may be required to reach an employment decision. I agree to hold such persons harmless with respect to any information they may supply. I understand and agree that any offer of employment is contingent upon a successful background check process, including state and federal criminal history checks.

I certify that all information provided by me in this application is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation, or omission of any facts in this application or any other document submitted in connection with YMCA employment will result in denial of employment or termination of employment regardless of the timing or circumstances of discovery.

If I am employed by the YMCA, I understand my employment can be terminated, with or without cause and with or without notice, at any time at the option of the YMCA or myself. I understand that, other than the CEO of the YMCA, no manager, supervisor or representative of the YMCA has authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing. Only the CEO of the YMCA has the authority to make any agreement contrary to the foregoing and then only in writing. I further expressly agree that, with respect to the at-will employment relationship, this constitutes the full, complete and final expression of the parties' intent concerning the nature of any employment relationship between myself and the YMCA.

I understand that all offers of employment are conditional upon my ability to provide appropriate documents regarding my identity and legal right to work in the United States. I understand that this application is only valid for the position applied for at present and that the YMCA is not obligated to retain or consider this application for future openings. If hired, I agree to abide by YMCA policies and rules at all times. I acknowledge that I have read the above statements and understand them.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

