

GREATER SCRANTON YMCA EMPLOYMENT APPLICATION

Date: _____

Personal Information

Name: _____ Phone Number: _____

Address:

Email Address:

Permanent Address (if different from above)

Have you been convicted of or pleaded no contest to a felony or misdemeanor? _____

If yes, please explain: _____

Position/Availability

Position applied for: _____ Full Time or Part Time?

Days/Hours Available:

Sun___ Mon___ Tue___ Wed___ Thu___ Fri___ Sat___

Hours Available: from _____ to _____

What date are you available to start work? _____

Education

Are you currently a student? _____ If so, where? _____

Education References

School	Degree	Graduation Date
_____	_____	_____
_____	_____	_____
_____	_____	_____

Skills and Qualifications: (License, Skills, Training, Awards)

Employment History

Present or Last Position:

Employer: _____ Supervisor: _____

Phone where supervisor can be reached: _____

Position Title: _____ Dates: _____ to _____

Reason for leaving: _____

Previous Position:

Employer: _____ Supervisor: _____

Phone where supervisor can be reached: _____

Position Title: _____ Dates: _____ to _____

Reason for leaving: _____

May we contact your present employer? _____

References *(other than family members or former employers)*

NAME/TITLE	ADDRESS	PHONE	OCCUPATION
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The facts set forth in my application for employment are true and complete. I understand that if employed, false statement on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make investigation of my personal history and financial and credit record through any investigative or credit agencies or bureau of your choice.

In making this application for employment I also understand that an investigative criminal inquiry may be made whereby information is obtained through the PENNSYLVANIA STATE POLICE. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request within a reasonable period for time to receive additional, detailed information about the nature and scope of this investigative report

X _____

Signature of Applicant

Date _____