



**FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY**

## Naugatuck YMCA APPLICATION FOR EMPLOYMENT

The Naugatuck YMCA encourages the participation of all people, and agrees and warrants that we do not discriminate or permit discrimination against any person or group of persons regardless of race, color, religious creed, age, marital status, familial status, national origin, ancestry, sex, gender identity or expression, intellectual disability, mental disability, learning disability, lawful source of income, or physical disability, including, but not limited to, blindness or deafness. The Naugatuck YMCA further agrees and warrants that we are in compliance with all laws and regulations of the United States and the State of Connecticut regarding equal employment opportunity and public accommodations with respect to our programs, clients, officers, employees, and volunteers.

It is the goal of the Naugatuck YMCA to provide a safe environment to all members and participants. In accordance with the Naugatuck YMCA’s Child Abuse Prevention Policy, I agree to allow the Naugatuck YMCA to run a criminal history and sex offender registry check on myself and understand that the results of this check *may* result in my inability to become an employee of the Naugatuck YMCA. **THE NAUGATUCK YMCA HAS A ZERO TOLERANCE POLICY REGARDING CHILD ABUSE.**  
Initial Here \_\_\_\_\_

### PERSONAL INFORMATION

First Name	MI	Last Name	Date	
Current Mailing Address	(# of Years)	City	State	Zip
Previous Mailing Address	(# of Years)	City	State	Zip
Phone	Email			
If hired, can you submit verification of your legal right to work in the United States?    YES                  NO				
Are you over 18 years of age?    YES                  NO				
Do you have reliable transportation to get to work?    YES                  NO				

### DESIRED EMPLOYMENT

POSITION desired: (please circle only ONE) <b>Leadership   Lifeguard   Swim Instructor   Camp   Child Care</b> <b>Child Watch   Fitness   Front Desk   Maintenance   Youth Programs</b> <b>Other:</b> _____ Application will be reviewed for only the selected position.	Desired Salary:  Start Date Available:
Have you ever applied to the Naugatuck YMCA before?    YES                  NO                                  If yes, when?	



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**EDUCATION AND TRAINING**

SCHOOL NAME & LOCATION	Years Attended		Graduate? (Yes/No)	What Degree	Major Subject/ Total Hours
	From	To			
High School					
College/University					
College/University					
Highest Degree Earned (Circle one number only): 1. High School   2. Associate   3. Bachelor   4. Master   5. Doctorate					
Additional Education, Vocational and/or Professional Information such as special areas of research or study, seminars, etc. Please attach any written resume or other summary of information that is relevant to the position for which you are applying. If familiarity with a foreign language is listed on the job description, please describe your foreign language skills below. Professional memberships, certificates or licenses held. (You may exclude those indicating race, color, religion, sex, sexual orientation, national origin, age, physical or mental disability or labor organization affiliations.) Supplement this information by written attachment if applicable.					

**U.S. MILITARY SERVICE DATA**

Branch:
List Special Training or Skills:

**EMPLOYMENT DATA**

If you are presently employed, may we contact your employer?                      YES                      NO

PLEASE LIST IN ORDER OF MOST RECENT EMPLOYMENT FIRST					
Company Name			Phone		
Address (Include Street, City, State, Zip Code)					
Job Title-Start	Job Title-Final	Dates of Employment From (Mo/Yr)		<b>TO</b>	
Supervisor (Name & Title)			Reason for leaving		
Description of Job Duties					
Company Name			Phone		
Address (Include Street, City, State, Zip Code)					
Job Title-Start	Job Title-Final	Dates of Employment From (Mo/Yr)		<b>TO</b>	
Supervisor (Name & Title)			Reason for leaving		
Description of Job Duties					



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Company Name	
Address (Include Street, City, State, Zip Code)	
Job Title-Start	Job Title-Final
Supervisor (Name & Title)	
Description of Job Duties	
Company Name	
Address (Include Street, City, State, Zip Code)	
Job Title-Start	Job Title-Final
Supervisor (Name & Title)	
Description of Job Duties	

**REFERENCE DATA**

Minimum of 2 Professional/Work References required

Name	Phone	Relationship to Applicant	Length of Relationship

**CERTIFICATIONS**

Please include dates for all that apply

Certification	Date Certified	Expiration Date
Lifeguard		
Swim Instructor		
Personal Training		
Group Exercise Instruction		
CPR/AED		
First Aid		
CT Childcare First Aid		
EMT		
Ropes Course		
Other:		
Other:		
Other:		



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Activities you have experience with: (please star (\*) any that you are able to teach)  
Examples include: crafts, music, nature studies, sports, recreation, swimming, boating, dramatics, teambuilding, computers, aerobics, dance, fitness.

Activity Name	Teach? (*)	General Description of Activity

### AGREEMENTS

I understand that this application is only valid for the position applied.

Initial \_\_\_\_\_

I authorize investigation of all statements contained in this application. I understand that falsification, misrepresentation or omission of facts called for will result in immediate termination from employment or removal of my application from consideration. I authorize the YMCA to secure information about my experience with former employers, education institutions and agencies, and for those parties to provide information concerning my experience releasing all parties from any liability arising therefrom.

Initial \_\_\_\_\_

I agree to allow the Naugatuck YMCA to run a criminal history and sex offender registry check on myself and understand that the results of this check may result in my termination.

Initial \_\_\_\_\_

If employed by the YMCA I will abide by Association policies and rules. I understand that I will be required to possess a current and valid driver's license if my position requires me to drive in the course of my work.

Initial \_\_\_\_\_

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.

Initial \_\_\_\_\_

My signature below certifies that I have read and understand the foregoing and to the best of my knowledge and belief, the information on this form is true and correct

Initial \_\_\_\_\_

My signature below also certifies that I agree to be bound by the terms and conditions stated in this application. This application contains all the understandings and agreements between me and the YMCA concerning the nature of my employment, if any, by the YMCA and supersedes all prior and/or contemporaneous practices, oral or written agreements, understandings, statements, representations and promises, express or implied, between me and the YMCA. I understand and agree that, except as noted above, no person who is either an agent or employee of the YMCA may modify, delete, vary or contradict, whether orally or in writing, the terms and conditions set forth herein.

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_