

**Notice to applicants & employees:  
The Hopkins County Family YMCA  
maintains a zero tolerance policy for  
abuse.**



**PLEASE READ BEFORE COMPLETING APPLICATION**

This organization does not discriminate in the recruitment, hiring, and conditions of employment on the basis of race, color, religion, national origin, sex, marital status, disability, age or veteran status. No question on this application is intended to secure information to be used in discriminatory manner. Your completed application will be reviewed carefully but its receipt does not imply that you will be employed. Employment consideration necessitates that you meet all minimum qualifications required for the position for which you are applying.

**(ANSWER ALL QUESTIONS COMPLETELY)**

**PERSONAL DATA**

Name \_\_\_\_\_ Today's Date \_\_\_\_\_  
Last First Middle Age

Current Address: \_\_\_\_\_  
Street City, State Zip Dates living at this address

Preferred Phone \_\_\_\_\_ Email \_\_\_\_\_

Previous Address: \_\_\_\_\_  
Street City, State Zip Dates living at this address

List other cities, counties, and states where you have lived/worked:

City	County	State	No. of Years	City	County	State	No. of Years
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Are you 18 years of age or over? \_\_\_\_\_ Are you a Veteran? \_\_\_\_\_  
If yes, Dates of Military Service \_\_\_\_\_

Other names used during prior employment \_\_\_\_\_  
Maiden Name, Other Surnames, Etc.

**FURNISH THIS INFORMATION ONLY IF REQUESTED**

Social Security Number \_\_\_\_\_ Driver's License Number \_\_\_\_\_ State \_\_\_\_\_ Class \_\_\_\_\_

How many moving violations during the last 3 years \_\_\_\_\_ Do you currently have liability insurance? \_\_\_\_\_

## GENERAL

Applying for position as \_\_\_\_\_ Acceptable Salary Range \_\_\_\_\_

Full-time \_\_\_ Part-time \_\_\_ Temporary \_\_\_ Notice Required \_\_\_\_\_ Date Available \_\_\_\_\_

If applying for seasonal work, are you available during the school year? \_\_\_ Yes \_\_\_ No

Have you previously applied for employment for any YMCA? YES NO Worked for any YMCA? YES NO

If so, when? \_\_\_\_\_ Location \_\_\_\_\_

How were you referred to the YMCA? \_\_\_ Employee \_\_\_ Advertisement \_\_\_ School \_\_\_ Drop In \_\_\_ Other

Name of referral source indicated above \_\_\_\_\_

Have you ever failed to be reemployed, ever been involuntarily discharged, fired or asked to resign a position?  
Yes \_\_\_ No \_\_\_ If yes, give dates and circumstances \_\_\_\_\_

## EMPLOYMENT

List all positions you have held, beginning with your most recent.  
Include self-employment and volunteer work.

Current, or most recent employer \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_

Street Address \_\_\_\_\_ Salary at start \_\_\_\_\_ to \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

Name of your direct supervisor \_\_\_\_\_ Your Title \_\_\_\_\_

Briefly describe your responsibilities \_\_\_\_\_

Any experience with children? YES \_\_\_ NO \_\_\_ If yes, please give description of children:

Number of Children \_\_\_\_\_ Age Group \_\_\_\_\_ Sex \_\_\_ Male \_\_\_ Female \_\_\_ Both

Any experience supervising staff? YES \_\_\_ NO \_\_\_ If yes, please describe

Reason(s) for terminating, or considering a change \_\_\_\_\_

What did you like most about this job? \_\_\_\_\_

What did you like least about this job? \_\_\_\_\_

May we contact this employer while we are considering your application? \_\_\_ YES \_\_\_ NO

Next previous employer \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_

Street Address \_\_\_\_\_ Salary at start \_\_\_\_\_ to \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

Name of your direct supervisor \_\_\_\_\_ Your Title \_\_\_\_\_

Briefly describe your responsibilities \_\_\_\_\_

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Any experience with children? YES \_\_\_ NO \_\_\_ If yes, please give description of children:  
 Number of Children \_\_\_\_\_ Age Group \_\_\_\_\_ Sex \_\_\_ Male \_\_\_ Female \_\_\_ Both

Any experience supervising staff? YES \_\_\_ NO \_\_\_ If yes, please describe \_\_\_\_\_

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Reason(s) for terminating, or considering a change \_\_\_\_\_

What did you like most about this job? \_\_\_\_\_

What did you like least about this job? \_\_\_\_\_

May we contact this employer while we are considering your application? \_\_\_ YES \_\_\_ NO

**OTHER EMPLOYMENT NOT LISTED**

Employer/Location	Supervisor	Your Title	Dates of Employment
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Give dates and explanations of any gaps in employment history:

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## POSITION ON THE NATIONWIDE PROBLEM OF CHILD ABUSE

### THE YMCA ENDORSES AND ENFORCES ITS POLICIES AND PRACTICES TO PREVENT CHILD ABUSE

Our first priority in all youth programs is care and safety. We make an active and, we believe, effective effort to prevent child abuse, verbal, physical, emotional and sexual.

Our goals are:

- To support and strengthen the family unit.
- To help children develop to their fullest potential.
- To deliver the program in a positive environment of safety, support and care.

Allegations or suspicions of child abuse are taken very seriously by the Hopkins County Family YMCA and will be reported to the State for investigation. We will fully cooperate with any related investigations and will pursue the prosecution of child abusers to its full extent under the laws of this State.

All candidates will be subject to a thorough background investigation to screen out molesters which may include, but are not limited to, checking the following:

- Reference of past employers
- Civic involvement
- Personal references
- Military records
- Volunteer history
- Criminal background history
- Periodic interviews with children and parents about day-to-day experiences, encouraging reports of anything out of the ordinary

## STAFF CODE OF ETHICS

1. Staff will not verbally, physically, emotionally, or sexually abuse a child.
2. Staff will not be alone with children except with prior approval of senior leadership or in an emergency.
3. Staff will not use profanity in the presence of children, parents, participants or other staff.
4. Staff will not display intimate affection towards others in the presence of children, parents, or other participants.
5. Staff will not accept gifts of money from children, parents or other participants, nor will staff give gifts of money to children, parents and other participants.
6. Staff/volunteers will not socialize, associate, or provide services (such as babysitting, private lessons, etc.) for program participants under the age of 18 years outside of Hopkins County Family YMCA activities. There will be no exceptions unless individually approved by the CEO.
7. Staff will report any suspected abuse or neglect to Child Protective Services and law enforcement agencies as required by law.
8. Staff will treat all children, regardless of age, religion, race, ethnicity, gender, or disability with respect, compassion and kindness.
9. Staff will, at all times, portray a positive role model for children and youth by demonstrating respect, loyalty, patience, courtesy, tact, and maturity.
10. Staff will use only positive techniques of guidance and discipline, such as anticipation and prevention of potential problems, positive reinforcement and encouragement, and redirection.
11. Staff will never leave a child unsupervised in a YMCA program.
12. Staff will appear clean, neat and appropriately dressed.
13. Staff will not attend work with physical or psychological conditions that might adversely affect children's health or safety.
14. Staff will not use tobacco products during work hours on the YMCA campus.

15. Staff will not use, possess, or be under the influence of alcohol or illegal drugs during work hours.

I have read and understand Hopkins County Family YMCA's position on the Nationwide Problem of Child Abuse and the Staff Code of Ethics. I understand that any violation of the Code of Ethics may result in termination. Being full aware of the matters contained in this Staff Code of Ethics, I still desire consideration for employment.

Applicant/Employee \_\_\_\_\_

Date \_\_\_\_\_

## ARREST AND CONVICTION RECORD

The Hopkins County Family YMCA checks conviction records of all volunteers and applicants for employment.

A conviction does not necessarily mean that the YMCA will reject your application. We consider the nature of the offense, your age at the time, how long ago the offense occurred, and the position for which you are applying, among other factors. However, a false answer to this question may disqualify you from further consideration, or result in your termination for falsifying your application.

This question covers all crimes, including traffic offenses, except those traffic violations for which there was no final conviction (for example, you took a defensive driving course), or a fine of less than \$100 was paid.

Have you ever been convicted of, or pleaded guilty of "no contest" to, any criminal offense?  Yes  No

If you answered "Yes," give dates, places, and details:

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## COMPLETE IF APPLYING TO WORK WITH CHILDREN

\* If hired to work at the Child Development Center, you will need to submit a TB Skin Test and a copy of your high school diploma before working in a classroom with children. We must also receive a clean background check before you work in a classroom with children. All Child Development staff are required to take 15 hours of Cabinet-approved training each year. \*

Why do you want to work with and care for children? \_\_\_\_\_

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With what age group or sex do you prefer to work? Why? \_\_\_\_\_

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What is your philosophy about discipline? \_\_\_\_\_

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What do you do when you are upset or angry about something? \_\_\_\_\_

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Are you a pedophile or child abuser?  YES  NO

Have you ever been accused of being a pedophile or child abuser?  YES  NO If yes, please explain:

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Other than through employment, how are you involved with children? \_\_\_\_\_

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List the 3 greatest strengths and the 3 most difficult problems you have in working with children.

Greatest Strengths

Most Difficult Problems

1. \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

3. \_\_\_\_\_

## Education

	Name, City, and State	Dates	Type of Course or Major	Graduated?	Degree Received
High School	_____	From _____ To _____			
	_____				
College	_____	From _____ To _____			
	_____				
College	_____	From _____ To _____			
	_____				
Trade Bus., Night or Corres.	_____	From _____ To _____			
	_____				
Other	_____	From _____ To _____			
	_____				

Are you presently in school?  YES  NO If yes, give expected completion date: \_\_\_\_\_

List courses you are taking: \_\_\_\_\_  
\_\_\_\_\_

If not a high school graduate, indicate highest grade completed \_\_\_\_\_

If not a high school graduate, have you earned a General Education Development (GED) or high school equivalency?  
 YES  NO

## Special Skills

Describe any volunteer work, other experience, interest, training, or honors, received in connection with your service to any organizations which you consider relevant to your ability to perform the job sought.

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List all current license(s), permit(s), certification(s), and level or credited hours (CPR, Lifeguard, First Aid, CDL, etc.).

Type	Level	Expiration Date
_____	_____	_____
_____	_____	_____
_____	_____	_____

## Personal References (Not Employers)

List four references. Must include one relative.

At least one reference must be a male and one reference a female.

Name and Address	Firm Name/address, if applicable	Phone Numbers	Know in what capacity? (friend, pastor, etc.)	How long known?

List below the names of relatives, friends, or acquaintances employed by this YMCA and their relationship to you.

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**Please read carefully before signing**

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I hereby certify that the information provided on this application is accurate to the best of my knowledge and subject to verification by the Hopkins County Family YMCA. I authorize the YMCA, its affiliates, and their representatives to investigate all information given and to secure additional job-related information, if necessary. I authorize an investigative report to be made whereby information obtained through personal interviews with friends, neighbors, or others with whom I am acquainted. I understand and consent to an inquiry that may include information as to my character, general reputation, employment references, verification or previous employment and employment references, verification of education including requests for transcripts, motor vehicle driving records and criminal reports, etc. I hereby release from all liability or responsibility all persons, companies, organizations or corporations furnishing such information.

I also understand that any misrepresentation or omission of a material fact on my application may be justification for refusal of employment, or if employed, dismissal without advance notice.

I hereby certify that the information provided on this application is accurate to the best of my knowledge and subject to verification by the YMCA. I authorize the schools, persons, previous employers, agencies and other organizations named in this application to provide the YMCA (its authorized employees, agents or representatives) with any relevant information that may be required to arrive at an employment decision and hereby release any such schools, persons, employers, agencies and organizations from any and all liability which they might otherwise incur as a result.

In the event I am employed, I understand that all employees are subject to termination at the discretion of the YMCA. If, in the event I choose to voluntarily terminate my employment, I am free to do so at any time, and, if I choose to give proper notice of termination, the association may either permit me to continue my employment during the notice period or may accept my resignation immediately.

I understand that, in the event I am employed by the YMCA, my compensation, hours of employment and all other terms and conditions of employment are subject to modification or change by the YMCA at its discretion.

I authorize the YMCA to supply my employment record, in whole or in part, and in confidence, to any prospective employer, government agency, or other party, with a legal and proper interest.

In the event of my employment, I will comply with all rules and regulations as set forth in the YMCA's policy manual or other communications distributed to employees, and understand a condition of my continued employment will be my compliance with the YMCA's controlled substance abuse policy. I have read, understand and support the YMCA's position on the problem of child abuse.

I understand that beginning and continuing employment at the YMCA depends, in part, on the following:

1. Passing a drug screen and/or physical examination, if requested by the YMCA, to be given by a doctor or nurse, or medical facility selected by the YMCA.
2. Satisfying the YMCA's requirements concerning:
  - A. My driving record,
  - B. My criminal history record,
  - C. Reference checks, and
  - D. Documents required by law.

I understand that as long as my employment with the YMCA lasts, the YMCA may repeat any or all of the above requirements at any time.

I understand the completion of this form does not guarantee my status as an applicant or any consideration for employment unless I meet all stated minimum qualifications required of the position for which I am asking to be considered.

I have read the above statements and accept the same as a condition of my employment with the YMCA.

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signature of applicant

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date

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