



**YOUNG MEN'S CHRISTIAN ASSOCIATION  
OF PALESTINE TEXAS  
APPLICATION FOR EMPLOYMENT**  
(EQUAL OPPORTUNITY EMPLOYER)

**PLEASE READ BEFORE COMPLETING THIS APPLICATION**

This association does not discriminate in the recruitment, hiring, and conditions of employment on the basis of race, color, religion, national origin, sex, marital status, sexual orientation, disability, age or veteran status. No question on this application is intended to secure information to be used in a 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.)**

<b>EMPLOYMENT DESIRED</b>		Date:
Applying for position:	Date Available:	
Which YMCA Department:	Acceptable Salary:	
Are you presently employed? YES NO	Notice Required: YES NO	
If applying for seasonal work, are you available to work during the school term? Yes No		
Have you ever applied at the Palestine YMCA before? YES NO If yes, when?		
Have you previously applied for employment for any YMCA? YES NO If yes, when?		
Have you ever been employed by any YMCA? YES NO If yes, when?		
What Branch?		

<b>PERSONAL DATA</b>		
Name:		
Current Address:		
City:	State:	Zip:
Email:	Home Phone	Cell Phone
Are you 18 years of age, or over? YES NO		
Are you a veteran? YES NO If Yes, Dates of Military Service		
Are you authorized to work in the United States? YES NO If you are hired you will be required to furnish proof of your employment eligibility.		

<b>BACKGROUND DATA</b>		
Other names used during prior employment:		
Previous Address:	How long?	
City:	State:	Zip:
Previous Address:	How long?	
City:	State:	Zip:
Have you lived out of state in the last 5 years? YES NO		
If yes, Previous Address:	State:	How long?
Have you ever plead guilty to, or been convicted of, a criminal offense? YES NO A conviction does not automatically mean you will not be offered a job. What you were convicted of, the circumstances surrounding the conviction and how long ago the conviction occurred are important considerations in determining your eligibility. Give all the facts, so that a fair decision can be made.		
If yes, give dates and circumstances:		
Have you failed to be reemployed, ever been involuntarily discharged, fired or asked to resign a position? YES NO If yes, give dates and circumstances:		

**EDUCATION AND TRAINING**

SCHOOL NAME & LOCATION	Years Attended		Graduate? (Yes/No)	What Degree	Major Subject/ Total Hours (if applicable)
	From	To			
High School					
College/University					
College/University					
Trade, Bus., Night					
Other					
Professional memberships, certificates or licenses held. (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.					
Computer Skills, i.e. Microsoft Office- Word, Excel, Outlook, etc.					
Other machines requiring special skills:					

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

Provide Class Schedule

Class	Days	Times

If not a high school graduate, indicate the 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 special license(s), permit(s), certification(s) and level or credit hours. (CPR, Lifeguard, First Aid, etc.)

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## EMPLOYMENT HISTORY

Current or Last employer			Employed from	to
Address:			Salary monthly start	to
City:	State:	Zip:	Phone #:	
Direct supervisor:		Your title:		
Briefly describe your responsibilities:				
Any experience with children?		YES	NO	If yes, number of children:      Age group:      Sex: M F Both
Any experience supervising staff?		Yes	No	If yes, 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				
Employer:			Employed from	to
Address:			Salary monthly start	to
City:	State:	Zip:	Phone #:	
Direct supervisor:		Your title:		
Briefly describe your responsibilities:				
Any experience with children?		YES	NO	If yes, number of children:      Age group:      Sex: M F Both
Any experience supervising staff?		Yes	No	If yes, 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				
Employer:			Employed from	to
Address:			Salary monthly start	to
City:	State:	Zip:	Phone #:	
Direct supervisor:		Your title:		
Briefly describe your responsibilities:				
Any experience with children?		YES	NO	If yes, number of children:      Age group:      Sex: M F Both
Any experience supervising staff?		Yes	No	If yes, 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				
Employer:			Employed from	to
Address:			Salary monthly start	to
City:	State:	Zip:	Phone #:	
Direct supervisor:		Your title:		
Briefly describe your responsibilities:				
Any experience with children?		YES	NO	If yes, number of children:      Age group:      Sex: M F Both
Any experience supervising staff?		Yes	No	If yes, 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				

## REFERENCE DATA

List three **Professional/Work** references we may contact

Name and Address	Firm/Name/Address	Phone Numbers	Email Address

## PERSONAL REFERENCES (Not Employers)

List three references, including one relative. At least one reference must be a male and one reference a female.

Name and Home Address	Firm/Name/Address, If applicable	Phone Numbers	Email Address	Known in what capacity? (friend, pastor, etc.)	How long known?

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

## THE YMCA'S POSITION ON THE NATION-WIDE 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 or sexual.

The YMCA goals are:

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

Allegations or suspicions of child abuse are taken very seriously by the YMCA and will be reported to the State of Texas for investigation and the YMCA 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 for employment will be subject to a thorough background investigation to screen out molesters, which may include, but are not limited to, checking the following:

- References of past employers
- Personal references
- Military records
- Volunteer organization history
- Periodic interviews with children and parents about day-to-day experiences, encouraging reports of anything out of the ordinary
- Civic involvement
- Criminal background history
- Personal characteristics/activities
- Psychological testing

**COMPLETE IF APPLYING TO WORK WITH CHILDREN**

Why do you want to work 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 serving with children.

Greatest Strengths	Most Difficult Problems
1.	1.
2.	2.
3.	3.

## 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 management 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 or money from children, parents or other participants, nor will staff give gifts or money to children, parents or 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 YMCA activities. There will be no exceptions unless individually approved by the Chief Executive Officer of the Palestine YMCA.
7. Staff will report any suspected abuse or neglect of a child to the Child Protective Services of The Texas Department of Protective and Regulatory Services and law enforcement agencies, as required by Texas State Law.
8. Staff will, at all times, portray a positive role model for youth by maintaining an attitude of respect, loyalty, patience, integrity, courtesy, and maturity.
9. Staff must treat all children, regardless of age, race, religion, ethnicity, gender, or disability with respect, compassion and kindness.
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.
12. Staff will appear clean, neat and appropriately dressed.
13. Staff will not attend work with physical and psychological conditions that might adversely affect children's health or safety.
14. Staff will not use tobacco products during working hours in the presence of children or parents.
15. Staff will not use, possess, or be under the influence of alcohol or illegal drugs during working hours.

While the YMCA does not discriminate against an individual's lifestyle, we will require that in the performance of their job they will abide by the standards of conduct set forth by the YMCA, and outside the YMCA not participate in alternative lifestyle choices that would reflect negatively on the YMCA.

I have read and understand "The YMCA's Position on the Nation-wide 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 fully aware of the matters contained in this Staff Code of Ethics, I still desire consideration for employment by the YMCA.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE READ CAREFULLY BEFORE SIGNING**

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 any 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. I understand that any misrepresentation or omission of a material fact on my application may be justification for refusal of employment.

I hereby give my permission for the YMCA to obtain information relating to my criminal history record. I understand that this information will be used to determine my eligibility for employment with the YMCA.

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 the YMCA's discretion.

I also understand that, if employed, any misrepresentation made by me completing this application shall be considered as sufficient cause for my dismissal without advance notice.

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 by 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 and testing 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, nurse, or medical facility selected by the YMCA.
2. Satisfying the YMCA's requirements concerning:
  - My driving record
  - My criminal history record
  - Reference checks, and 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 also agree to cooperate fully with any investigation, and failure to do so may result in termination.

I understand that completion of this form does not guarantee me 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.

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

\_\_\_\_\_  
Date