



HASTINGS FAMILY YMCA

APPLICATION FOR COMMUNITY SERVICE

AT THE YMCA, WE KNOW THAT YOUR TIME AND TALENTS ARE PRECIOUS, AND WE WANT EVERY MINUTE YOU SPEND WITH US TO BE WORTHWHILE. THAT IS WHY WE ARE ASKING YOU TO TAKE AFEW MINUTES TO FILL OUT THIS APPLICATION. IT WILL HELP US TO MAKE THE RIGHT DECISION THAT BEST UTILITIZES YOUR SKILLS AND INTERESTS WITH THE OPPORTUNITIES AVAILABLE. THANK YOU FOR YOUR COOPERATION IN THIS EFFORT AND YOUR INTEREST IN THE YMCA.

To help us learn about your experience, abilities, and interests, please complete this Application for Community Service as thoroughly as possible.

PERSONAL INFORMATION

Please PRINT or TYPE

Name: _____ Social Security No. _____

Address: _____

Number of years at this address? _____ Home Telephone No. _____

Do you have a reliable means of transportation to get here? Circle. Yes No

Current Charge: (if applies) _____

My arrest and conviction record includes: _____

Skills/Training/Interests that you may be able to use: _____

Community Service Requirements:

Number of hours to be completed: _____

Date hours must be completed: _____

EDUCATION AND TRAINING

SCHOOL NAME & LOCATION	YEARS ATTENDED		GRADUATE? YES/NO	WHAT DEGREE	MAJOR SUBJECT/TOTAL HOURS (if applicable)
	FROM	TO			
Elementary					
High School					
College/University					
College/University					
Highest Degree Earned					
Circle One number only: 1. High School 2. Associate 3. Bachelor 4. Master 5. Doctorate					

EMPLOYMENT DATA

Please list in order of most recent employment first

Company Name:		Phone No:		Dates of Employment From (Mo/Yr) To (Mo/Yr)		
Address (Include Street, City, State, Zip Code)						
Job Title-Start		Job Title-Final		Base Rate of Pay Start Final		
Supervisor (Name & Title)						
Description of Job Duties:						
Company Name:		Phone No:		Dates of Employment From (Mo/Yr) To (Mo/Yr)		
Address (Include Street, City, State, Zip Code)						
Job Title-Start		Job Title-Final		Base Rate of Pay Start Final		
Supervisor (Name & Title)						
Description of Job Duties:						

REFERENCE DATA

PROFESSIONAL/WORK REFERENCES WE MAY CONTACT

Name	Address	Phone No.

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.

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, expressed 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 of Application

Interviewers Signature

Date of Application

For Personnel Use Only

