

We appreciate your interest in our organization! Please complete all sections in **ink** (or type) and indicate "not applicable" where needed. Attaching and referencing a resume without a completed application is not acceptable.

PERSONAL INFORMATION

Last Name	First Name	Middle Initial	Preferred Name	Date of Application	
Present Address		Apt. #	City	State	Zip
Permanent Address (if different than above)		Apt. #	City	State	Zip
Telephone Number		Cell Phone Number			
Email Address		Are you 18 years or older? <input type="checkbox"/> YES <input type="checkbox"/> NO			

GENERAL INFORMATION

Position(s) applied for:	Check all that apply: Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> On-Call <input type="checkbox"/> Seasonal
Are you employed now? <input type="checkbox"/> YES <input type="checkbox"/> NO	If so, may we contact your present employer? <input type="checkbox"/> YES <input type="checkbox"/> NO
When are you available to begin work?	Have you ever worked for any YWCA before? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes , when, where & dates? _____
Are you authorized for employment in the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO	Have you ever been convicted of a crime, misdemeanor or felony other than one for which the record has been sealed, eradicated, erased, or expunged? If you answer yes, please provide details for each conviction, including the specific offense for which you were convicted, the county and state in which you were convicted, and the date of conviction. _____ _____ <i>(A conviction record may not necessarily disqualify you for consideration for employment.)</i>
Rate of Pay desired:	Shift Preference: <input type="checkbox"/> Any <input type="checkbox"/> Day <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening <input type="checkbox"/> Weekend
How did you learn about this position? <input type="checkbox"/> Newspaper/Magazine/Internet Ad <input type="checkbox"/> Current YWCA Employee Employee name _____ <input type="checkbox"/> School or University <input type="checkbox"/> Other	Do you currently have a relative working at the YWCA? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, name of current employee _____

EMPLOYMENT HISTORY (Start with most recent employment.)

Period of Employment (month/year) From:	Name and Address of Company	Positions Held or Duties Performed
To:		
Supervisor:		Telephone:
May we contact this supervisor? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Reason for Leaving:		

EDUCATION

Type of School	Name/Location of School	Degree/Major	Did you Graduate?
High School or GED			<input type="checkbox"/> Yes <input type="checkbox"/> No
College / University or Vocational school			<input type="checkbox"/> Yes <input type="checkbox"/> No
College/ University or Vocational school			<input type="checkbox"/> Yes <input type="checkbox"/> No
Graduate School			<input type="checkbox"/> Yes <input type="checkbox"/> No
Other (please specify):			<input type="checkbox"/> Yes <input type="checkbox"/> No

List any additional skills, experience, training or special education: _____

ACKNOWLEDGEMENT & SIGNATURE

Please read before signing.

I hereby affirm that the information given by me on this application is both accurate and complete. I understand that any falsification or omission on this application, or otherwise providing false information to the YWCA at any time, will be grounds for immediate termination regardless of when the falsification or omission is discovered. I further understand that, if I provide false information, or fail to fully answer any question on this application, I will not be eligible for employment with the YWCA.

I understand that if I am hired by the YWCA, I will be an employee-at-will. This means that either party may end the relationship at any time for any reason not otherwise prohibited by law, and with or without notice. No representative of the YWCA, other than the President, has the authority to alter or change any of the above or to make any agreement for employment for a specified period of time, or to make any other agreement contrary to the foregoing.

I understand that job applicants will be required to submit to drug/alcohol testing after receiving a conditional offer of employment and must pass that test prior to assuming any duties. I understand and agree to comply with this condition of employment.

I authorize a thorough investigation to be made in connection with this application concerning my character, general reputation, personal attributes, employment, education, criminal record, and credit history, as may be applicable for employment purposes. I hereby further release and hold harmless the YWCA and its officers, employees, agents, and any other parties inquiring about, investigating, furnishing, communicating, reviewing, or evaluating such information from any and all potential claims, demands, damages, and/or actions of any kind arising from such investigation.

I understand that my application will be kept on file for 3 months. I understand that if I have not been contacted by the YWCA within 3 months, and if I still wish to be considered for employment, I will need to complete a new application.

We are an equal opportunity employer. The YWCA does not discriminate in hiring or terms and conditions of employment because of an individual's race, color, religion, gender, gender identity, national origin, citizenship, age, disability, sexual orientation, marital status, genetic information, military/veteran status, or any other protected category recognized by state, federal, or local laws.

Signature of Applicant _____ Date _____

FAIR CREDIT REPORTING ACT DISCLOSURE AND AUTHORIZATION

The YWCA may wish to obtain and use a Consumer Report from a Consumer Reporting Agency when considering your application for employment, when making a decision whether to offer you employment, when deciding whether to continue your employment if you are hired, and when making other employment-related decisions directly affecting you. The terms "Consumer Report Agency" and "Consumer Reporting" are defined in the Fair Credit Reporting Act ("FCRA"). As an applicant for employment or an employee of the YWCA, you are a "consumer" with rights under the FCRA.

A "Consumer Reporting Agency" is a person or business that for monetary fees, dues, or on a cooperative nonprofit basis regularly assembles or evaluates consumer credit information or other information on consumers for the purpose of furnishing consumer reports to others such as the YWCA.

A "Consumer Report" is any written, oral, or other communication of any information by a Consumer Reporting Agency bearing on a consumer's credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living that is used or collected for the purpose of serving as a factor in establishing the consumer's eligibility for employment purposes.

If the YWCA obtains a Consumer Report about you and if it considers any information in the Consumer Report when making an employment-related decision that directly and adversely affects you, you will be provided with a copy of the Consumer Report before the decision is finalized. You may also contact the Federal Trade Commission about your rights under the FCRA as a consumer with regard to Consumer Reports and Consumer Reporting Agencies.

By signing below, you voluntarily authorize the YWCA to obtain "Consumer Reports" about you from a "Consumer Reporting Agency" and to consider the "Consumer Reports" when making decisions regarding whether to offer you employment, when deciding whether to continue your employment (if you are hired), and when making other employment related decisions directly affecting you.

Authorized:

Name (Print)

Name (Signature)

Date

Social Security Number