



## Application for Employment

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Full or Part-Time (circle one)

Position applying for: \_\_\_\_\_

| Availability | Monday | Tuesday | Wednesday | Thursday | Friday |
|--------------|--------|---------|-----------|----------|--------|
| Times        |        |         |           |          |        |

Desired Start Date: \_\_\_\_\_ Desired Salary: \_\_\_\_\_

Are you currently employed: \_\_\_\_\_

Were you ever employed by the YWCA of Genesee County, Inc.? Yes No (circle one)

When: \_\_\_\_\_ Where: \_\_\_\_\_

Have you applied to the YWCA of Genesee County, Inc. before? \_\_\_\_\_ When? \_\_\_\_\_

How did you hear about the YWCA of Genesee County, Inc.? \_\_\_\_\_

Education: Fill out highest level completed

| School      | Name and Location | Degree/Area of Study | Number of years attended | Graduated Yes or No |
|-------------|-------------------|----------------------|--------------------------|---------------------|
| High School |                   |                      |                          |                     |
| College     |                   |                      |                          |                     |
| Graduate    |                   |                      |                          |                     |
| Other       |                   |                      |                          |                     |

Describe any specialized training, apprenticeship, skills and extra-curricular activities:

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State any additional information you feel may be helpful to us in considering your application:

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Training/Certifications: List certifications you currently carry in disciplines, services and/or areas that may be applicable to the YWCA of Genesee County, Inc.

| Name of Course | Sponsoring Organization and Location | C.E.U.'s | No. of hours | Date Completed |
|----------------|--------------------------------------|----------|--------------|----------------|
|                |                                      |          |              |                |
|                |                                      |          |              |                |
|                |                                      |          |              |                |
|                |                                      |          |              |                |

**VOLUNTEER ACTIVITIES** (Do not list organizations whose name or nature indicates your race, sex, national origin, age or religion)

| Organization | Position/Offices held | Describe Responsibilities | No. of Years |
|--------------|-----------------------|---------------------------|--------------|
|              |                       |                           |              |
|              |                       |                           |              |
|              |                       |                           |              |

Employment History (most recent first)

|                     |  |
|---------------------|--|
| Company             | Job Title  |
| Address             | Phone  |
| Supervisor          | Starting Salary                      Ending Salary |
| Dates of Employment | Reason for Leaving                                 |

|                     |  |
|---------------------|--|
| Company             | Job Title  |
| Address             | Phone  |
| Supervisor          | Starting Salary                      Ending Salary |
| Dates of Employment | Reason for Leaving                                 |

|                     |  |
|---------------------|--|
| Company             | Job Title  |
| Address             | Phone  |
| Supervisor          | Starting Salary                      Ending Salary |
| Dates of Employment | Reason for Leaving                                 |

I hereby authorize you to check all my educational references and the personal and employment references as indicated in this application; I further authorize these references to release to you all information that they have about me (circle all that apply):

Present Employer

Previous Employer

References Listed

Three references are required (family members are not acceptable as references).

|             |                          |
|-------------|--------------------------|
| Name        | Title                    |
| Address     | Phone                    |
| Years Known | Personal or Professional |

|             |                          |
|-------------|--------------------------|
| Name        | Title                    |
| Address     | Phone                    |
| Years Known | Personal or Professional |

|             |                          |
|-------------|--------------------------|
| Name        | Title                    |
| Address     | Phone                    |
| Years Known | Personal or Professional |

Why are you interested in working with children?

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What do you think the job duties for the position you're applying for are? \_\_\_\_\_

\_\_\_\_\_

Why did you choose to apply to the YWCA of Genesee County, Inc.? \_\_\_\_\_

\_\_\_\_\_

Are you legally eligible for employment in the United States, and if hired are you able to present evidence of your authorization to the work in the US?

Yes No (circle one)

Have you ever been convicted of a crime, including sex related or child abuse offenses?

Yes No (circle one)

I understand that the YWCA of Genesee County, Inc. is a mission driven, human service organization founded on the core values of eliminating racism and empowering women. In applying for employment with the YWCA of Genesee County, Inc., I acknowledge that I am willing to hold myself to a higher standard and model the core values of the YWCA of Genesee County, Inc. in my professional and personal conduct in and around the YWCA, its members and guests.

Yes No (circle one)

I understand that this employment application and any other YWCA of Genesee County, Inc. documents are not contracts of employment, and that any individual who is hired may voluntarily leave employment upon proper notice and may be terminated by the Association at any time. I understand that any oral or written statements to the contrary are hereby expressly disavowed and should not be relied upon by any prospective or existing employee.

Yes No (circle one)

Requirements for employment per Office for Children and Family Services include documentation of TB/physical within 2 years (employees expense), background check, including Office for Children and Family Services Fingerprinting, CPR and first aid, copy of school transcripts/diploma or equivalent.

I certify that the information included in this application is correct to the best of my knowledge.

Print Name: \_\_\_\_\_

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

Date: \_\_\_\_\_

Return application to: YWCA of Genesee County, Inc. Phone: 585-343-5808  
301 North Street Fax: 585-343-0143  
Batavia, NY 14020