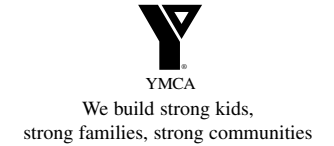


Metuchen Edison Woodbridge YMCA APPLICATION FOR EMPLOYMENT



I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (1) cancel further consideration of this application, or (2) immediately discharge me from the employer's service whenever it is discovered.

I authorize, without reservation, the Metuchen Edison Woodbridge YMCA, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and education institutions and to otherwise verify the accuracy of all information provided by me in this application. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the Metuchen Edison Woodbridge YMCA does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state, or federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the Metuchen Edison Woodbridge YMCA reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration are valid unless they are in writing and signed by the Chief Executive Officer and the Board President.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete a Form I-9 in this regard.

I also understand that the Metuchen Edison Woodbridge YMCA does perform a criminal background check and agree to this process.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENT:

I have read the above statement, understand it and accept all terms of the above statement:

Signature of Applicant: _____

Date: _____

Please indicate locations your application should be considered for:

MAIN BRANCHES

- Edison Branch YMCA (N. Edison)
- Metuchen Branch YMCA
- Woodbridge Branch YMCA
- South Amboy Branch YMCA

CHILD CARE FACILITIES

- Avenel
- Colonia
- Edison
- Fords
- Metuchen
- Perth Amboy

SEASONAL FACILITIES

- Edison Community Pool/ELKS
- Oakcrest Camp & Pool (N. Edison)
- Highland Grove Camp & Pool (Fords)
- Camp Munsee (Metuchen)
- Camp Lenape (Piscataway)
- Bowtie Pool (Woodbridge)

We are an equal opportunity employer. Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resource Department.

PERSONAL INFORMATION

DATE _____

NAME _____
Last First Middle

PRESENT ADDRESS _____
Street City State Zip

PERMANENT ADDRESS _____
Street City State Zip

PHONE NO. _____ **ARE YOU 18 YEARS OR OLDER?** YES NO

STATUS OF ORIGIN The Immigration Reform and Control Act of 1986 requires all new employees to answer the following questions:

ARE YOU A U.S. CITIZEN? YES NO ARE YOU AN ALIEN LAWFULLY AUTHORIZED TO WORK IN THE UNITED STATES? _____
(Form I-9 must be completed to certify eligibility for employment.)

EMPLOYMENT DESIRED

POSITION _____ DATE YOU CAN START _____ SALARY DESIRED _____

ARE YOU EMPLOYED NOW? _____ IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? _____

EVER APPLIED TO THE YMCA BEFORE? _____ WHERE? _____ WHEN? _____

EDUCATION	NAME AND LOCATION OF SCHOOL	*NO. OF YEARS ATTENDED	*DID YOU GRADUATE?	SUBJECTS STUDIED
GRAMMAR SCHOOL	_____	_____	_____	_____
HIGH SCHOOL	_____	_____	_____	_____
COLLEGE	_____	_____	_____	_____
TRADE, BUSINESS, OR CORRESPONDENCE SCHOOL	_____	_____	_____	_____

* The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.

HAVE YOU EVER BEEN CONVICTED OF A CRIME?* YES NO If yes, describe: _____

**Answering "yes" to this question does not constitute an automatic bar to employment - Factors such as date of offense, seriousness of nature, of violation, and position applied for will be taken into account.

PHYSICAL RECORD (This section must be completed.):

DO YOU HAVE ANY PHYSICAL LIMITATIONS THAT PRECLUDE YOU FROM PERFORMING ANY WORK FOR WHICH YOU ARE BEING CONSIDERED/? YES NO

If yes, what can be done to accommodate your limitations? Please Describe: _____

GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK _____

U.S. MILITARY OR NAVAL SERVICE _____ RANK _____ PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES _____

ACTIVITIES (Other than Religious (Civic, Athletic, Fraternal, etc.)) _____

Exclude organizations. The name or character of which indicates the race, creed, sex, marital status, age, color or national origin of its members.

EMPLOYMENT HISTORY

Provide the following information of your past and current employers, assignments or volunteer activities starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

EMPLOYER	TELEPHONE # ()	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
		FROM	TO	
ADDRESS				
STARTING JOB TITLE / FINAL JOB TITLE				
HOURLY RATE/SALARY				
STARTING				
IMMEDIATE SUPERVISOR AND TITLE		\$	PER	
REASON FOR LEAVING				
HOURLY RATE/SALARY				
FINAL				
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		\$	PER	

EMPLOYER	TELEPHONE # ()	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
		FROM	TO	
ADDRESS				
STARTING JOB TITLE / FINAL JOB TITLE				
HOURLY RATE/SALARY				
STARTING				
IMMEDIATE SUPERVISOR AND TITLE		\$	PER	
REASON FOR LEAVING				
HOURLY RATE/SALARY				
FINAL				
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		\$	PER	

EMPLOYER	TELEPHONE # ()	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
		FROM	TO	
ADDRESS				
STARTING JOB TITLE / FINAL JOB TITLE				
HOURLY RATE/SALARY				
STARTING				
IMMEDIATE SUPERVISOR AND TITLE		\$	PER	
REASON FOR LEAVING				
HOURLY RATE/SALARY				
FINAL				
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		\$	PER	

Comments: _____

Skills, Qualifications and Special Accomplishments: List any specialized training, skills, licenses, and/or certifications that may qualify you as being able to perform the job-related functions in the position(s) you are applying for:

In case of emergency notify: (DO NOT LEAVE BLANK)

Name: _____ Phone: _____

REFERENCES

PROFESSIONAL REFERENCES

Please list 3 professional references who can verify your work history and performance. References should not be relatives and at least two must have directly supervised you at some time in your work history.*

Please print:

1. **Name of Supervisor** _____ Title _____
 Company Name and Address _____

 Company Phone Number (including area code and extension) _____

2. **Name of Supervisor** _____ Title _____
 Company Name and Address _____

 Company Phone Number (including area code and extension) _____

3. **Name of Supervisor** _____ Title _____
 Company Name and Address _____

 Company Phone Number (including area code and extension) _____

PERSONAL REFERENCES

Please list 2 personal references

1. Name and Address _____

 Company Phone Number (including area code and extension) _____
 Occupation _____ Years Acquainted _____
 How do you know this individual? _____

2. Name and Address _____

 Company Phone Number (including area code and extension) _____
 Occupation _____ Years Acquainted _____
 How do you know this individual? _____

* **Please note:** For those applicants with no prior work history, please provide the name of a guidance counselor, teacher, coach, clergy etc.

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