

# Employment Application Form

<p align="center"><b>PLEASE PRINT ALL INFORMATION REQUESTED.</b></p> <p align="center"><b>PLEASE ATTACH A COPY OF YOUR RESUME AND COVER LETTER IF AVAILABLE</b></p>	<h2 style="margin: 0;"><u>Winona Family YMCA</u></h2> <p style="margin: 5px 0;"><b>902 Parks Avenue Winona, MN 55987</b></p> <p style="margin: 5px 0;"><b>507-454-1520</b></p>
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**APPLICATION FOR EMPLOYMENT**

Position Applying for:	Date:			
Name				
Last	First	Middle		
Present address				
Number	Street	City	State	Zip
Primary Telephone ( ) -		Email Address @ .COM		

Are you legally eligible to work in the United States?    Yes    No

<p><b>Position applying for:</b> _____</p> <p><b>Desired salary (<i>be specific</i>)</b> _____</p> <p><b>Are you over the age of 18?</b>          Yes    No</p> <p><b>Desired employment type:</b></p> <p>Full-Time                                  Seasonal</p> <p>Part-Time                                  Volunteer</p> <p>Either Full or Part -Time</p>	<p><b>Available hours of work (Please specify ONLY hours available)</b></p> <p>Open Availability    <input type="checkbox"/></p> <p>Monday                  _____</p> <p>Tuesday                 _____</p> <p>Wednesday             _____</p> <p>Thursday                _____</p> <p>Friday                    _____</p> <p>Saturday                 _____</p> <p>Sunday                   _____</p>
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What is the maximum hours you can work weekly? \_\_\_\_\_

First available start date \_\_\_\_\_

Who referred you for this position? \_\_\_\_\_

Were you previous YMCA staff? When, where and what position? \_\_\_\_\_

	Name of School or Institution	Location	Number of Years Completed	Major	Degree Earned
High School					
College					
Bus. or Trade School					
Professional School					

**Do you hold any special certifications? I.E. CPR, First Aid, Fitness, Trainer, other.**

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**Work Experience** Please list your work experience for the **MOST RECENT PAST THREE POSITIONS HELD**.  
 If you were self-employed, give firm name. Attach additional sheets if necessary or a typed resume.

**\*\*\* If you are providing resume with work experience-you do not need to provide in this section**

**May we contact your present employer?**     Yes     No

Name of employer Address	Name of last supervisor	Employment dates	Pay or salary
City, State, Zip Code Phone number		From To	Start Final
Your last job title			
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary
City, State, Zip Code Phone number		From To	Start Final
Your Last Job Title			
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary
City, State, Zip Code Phone number		From To	Start Final
Your last job title			
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

**Personal References-** Please do not list relatives.

Name	Name
Position	Position
Company	Company
Address	Address
Telephone (        )	Telephone (        )

**Please list any other qualifying or specialized skills you think would make you an ideal candidate for the position and as an employee of the Winona Family YMCA**

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**Please Read Carefully**

The Winona Family YMCA is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with Winona Family YMCA depends solely on your qualifications.

By submission of this application, the Winona Family YMCA reserves the right of investigation of all statements contained in this application. The applicant should be of the understanding that any misrepresentation or omission of facts listed on this application or the attached for consideration, is cause for the dismissal of employment at any time without any previous notice. The submission of this application provides the Winona Family YMCA permission to contact schools, previous employers (unless otherwise indicated), references, and hereby releases the Winona Family YMCA from any liability as a result of such contact.

**Thank you for completing this application form and for your interest in our business. Please submit additional materials of a resume and/or cover letter along with this application if available.**

**Please submit this to the front desk or to email of [nvolner@winonaymca.org](mailto:nvolner@winonaymca.org)**

**X**

**Date** \_\_\_\_\_