



**FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

EMPLOYMENT APPLICATION

Thank you for your interest in the YMCA!	
<p>The YMCA is an equal opportunity employer and does not discriminate in recruitment, hiring or other terms or conditions of employment on the basis of race, color, religion, national origin, sex, disability, age or any other status protected by law.</p> <p>If you would like to apply to join the YMCA staff team, please complete the application below.</p> <ul style="list-style-type: none"> Be sure to write legibly The application must be completed in full. Do not leave any spaces blank or write "see resume" in response to any question. Applicants for child care positions must include a resume. Read and sign the last page of the application. 	<p>YMCA OF GREATER KALAMAZOO 1001 W. MAPLE STREET KALAMAZOO MI 49008</p>
Personal Information	
Position Applying For: _____ Date: _____	
Preferred YMCA Location: Maple Branch Portage Branch Lincoln Youth Center Child Care Date Available: _____	
NAME: _____ E-mail: _____ Last First MI	
Address: _____ Street City State ZIP	
Telephone: Home _____ / _____ Business _____ / _____ Mobile _____ / _____	
Are you 18 years of age or older? <i>(If not, you may be required to provide work authorization.)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
If hired, can you provide verification of your legal right to work in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Can you perform the essential functions of the job for which you are applying, with or without reasonable accommodation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of a crime? Have you ever been arrested for a felony? <i>(A conviction will not necessarily bar employment. The YMCA may consider the nature, date and circumstances of the offenses.)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>Notice to All Applicants: The YMCA enforces its policies and practices to prevent child abuse.</p> <p>Allegations or suspicions of child abuse are taken very seriously at the YMCA and will be reported to the proper authorities for investigation. We have abuse reporting procedures, an open door for parents, and a code of conduct for staff. We minimize opportunities for abuse to occur and we talk with children about personal safety and touching limits. We also screen carefully to prevent abusers from being hired and we provide child abuse prevention training to staff.</p>	

Employment Application

List all previous employment during the past seven years starting with the most recent. Use additional sheets if needed.

Employment History		List all previous employment during the past seven years starting with the most recent. Use additional sheets if needed.	
Employer	Telephone /	<u>Dates Employed</u> From: ___/___	Summarize the nature of the work performed and job responsibilities.
Address		To: ___/___	
Job Title	<u>Starting Hourly Rate/Salary</u> \$ _____ per _____		
Immediate Supervisor and Title	<u>Ending Hourly Rate/Salary</u> \$ _____ per _____		
Reason for Leaving	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

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Reason for Leaving	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

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Address		To: ___/___	
Job Title	<u>Starting Hourly Rate/Salary</u> \$ _____ per _____		
Immediate Supervisor and Title	<u>Ending Hourly Rate/Salary</u> \$ _____ per _____		
Reason for Leaving	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Please explain any gaps in your employment history.

What other business experience, personal experience or training have you had that may have prepared you for this position?

Application Acknowledgement and Authorization

Please read all statements and sign below:

I authorize both the YMCA and persons listed (references, schools, current (unless noted) and former employers and any others with whom you desire to check) to communicate with regard to any relevant information that may be required to reach an employment decision. I agree to hold such persons harmless with respect to any information they may supply. I understand and agree that any offer of employment is contingent upon successful completion of all background check processes, including a criminal history background check.

I certify that all information provided by me in this application is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation, or omission of any facts in this application or any other document submitted in connection with YMCA employment will result in denial of employment or termination of employment regardless of the timing or circumstances of discovery.

If I am employed by the YMCA I understand my employment can be terminated, with or without cause and with or without notice, at any time at the option of the YMCA or myself. I understand that, other than the CEO of the YMCA, no manager, supervisor or representative of the YMCA has authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing. Only the CEO of the YMCA has the authority to make any agreement contrary to the foregoing and then only in writing. I further expressly agree that, with respect to the at-will employment relationship, this constitutes the full, complete and final expression of the parties' intent concerning the nature of any employment relationship between myself and the YMCA.

I understand that all offers of employment are conditional upon my ability to provide appropriate documents regarding my identity and legal right to work in the United States. I understand that this application is only valid for the position applied for at present and that the YMCA is not obligated to retain or consider this application for future openings. If hired, I agree to abide by YMCA policies and rules at all times. I acknowledge that I have read the above statements and understand them.

Signature: _____ Date: _____



YMCA of Greater Kalamazoo Background Check Authorization

DISCLOSURE REGARDING CONSUMER REPORTS

The YMCA of Greater Kalamazoo ("the Company") may obtain information about you from a consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, gathered by the consumer reporting agency and reported to the Company. These reports may contain, but may not be limited to, information regarding your criminal history, credit history, motor vehicle records ("driving records"), verification of your education or employment history or other background checks.

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The Federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:

- a person has taken adverse action against you because of information in your credit report;
- you are the victim of identity theft and place a fraud alert in your file;
- your file contains inaccurate information as a result of fraud;
- you are on public assistance;
- you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

You have the right to dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.

You may limit "prescreened" offers of credit and insurance you get based on information in your credit report. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).

You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

Identity theft victims and active duty military personnel have additional rights. For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General.

ADDITIONAL STATE LAW NOTICES REGARDING CONSUMER AND/OR INVESTIGATIVE CONSUMER REPORTS

The third party consumer reporting agency (CRA) providing the report is, or will be:

Out-of-State (outside of Michigan) Background Check:

Applicant Insight, Inc.
5652 Meadowlane Street
New Port Richey, FL, 34652
Website: www.applicantinsight.com/about/privacy.html
Phone: 1-800-771-7703

In-State Michigan Background Check:

ICHAT
Michigan State Police – CJIC
PO Box 30634, Lansing, MI 48909
Website: <https://apps.michigan.gov/>
Phone: 517-241-0606

If you live or work for the Company in any of the states listed below, please note the following:

Massachusetts applicants or employees only: You have the right to know if the Company requested an investigative consumer report about you, and you have the right to request a copy of such report by contacting the CRA identified above.

Minnesota applicants or employees only: You have the right, upon written request to the CRA, to receive a complete and accurate disclosure of the nature and scope of any consumer report. The CRA must make this disclosure within five days of receipt of your request or of Company's request for the report, whichever is later.

New Jersey applicants or employees only: You have the right to inspect and promptly receive a copy of any investigative consumer report requested by the Company by contacting the CRA identified above directly.

New York applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency identified above directly. You may also contact the Company to request the name, address and telephone number of the nearest unit of the consumer reporting agency designated to handle inquiries, which the Company shall provide within 5 days. Additionally, upon request, you will be informed whether or not a consumer report was requested by the Company, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report.

Oregon applicants or employees only: Information describing your rights under federal and Oregon law regarding consumer identity theft protection, the storage and disposal of your credit information, and remedies available should you suspect or find that the Company has not maintained secured records is available to you upon request.

Washington State applicants or employees only: You have the right to receive a complete and accurate disclosure of the nature and scope of any investigative consumer report as well as a written summary of your rights and remedies under Washington law.

New Hampshire applicants or employees subject to state driving record requests: Your authorization for the release of your driving record is limited to no more than 2 years from the date of the execution of this document. As it relates to your driving record, you have the right to revoke this authorization at any time.

ACKNOWLEDGMENT AND AUTHORIZATION

REGARDING CONSUMER AND/OR INVESTIGATIVE CONSUMER REPORTS

I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the **YMCA of Greater Kalamazoo** ("the Company") at any time after receipt of this authorization and throughout the term of my employment., if applicable, to the extent permitted by law. In accordance with this notice, I hereby authorize, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by **Applicant Insight, Inc., 5652 Meadowlane Street, New Port Richey, FL, 34652, www.applicantinsight.com, 1-800-771-7703, ICHAT, Michigan State Police – CJIC, PO Box 30634, Lansing, MI 48909, 1-517-241-0606**, another outside organization acting on behalf of the Company, and/or the Company itself.

By signing below, I also acknowledge receipt of the (1) DISCLOSURE REGARDING CONSUMER AND/OR INVESTIGATIVE CONSUMER REPORTS, (2) ADDITIONAL STATE LAW NOTICES REGARDING CONSUMER AND/OR INVESTIGATIVE CONSUMER REPORTS, and (3) A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

New York applicants or employees only: By signing below, you also acknowledge receipt of ARTICLE 23-A of the New York Correction Law.

California applicants or employees only:

Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law. By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW.

Minnesota applicants or employees only:

Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

Oklahoma applicants or employees only:

Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

Applicants or employees of any state not referenced above:

Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

Last name: _____ First name: _____ Middle name: _____
 I have no middle name

Signature: _____ Date: _____

INFORMATION ABOUT YOU REQUIRED FOR BACKGROUND CHECK

Applicants/Employees: Please provide the following information about yourself to facilitate a background check. Please note, all fields are required. When the "I have no middle name" is selected, Applicant Insight will process the corresponding services in a means consistent with the individual having no middle name. If no middle name ("NMN"), no middle initial ("NMI"), or some other similar text is provided, Applicant Insight will process the corresponding services in a means consistent with the individual having a middle name of "NMN" or "NMI". As such, should the screening or hiring process reveal identifying information inconsistent or contradictory with that provided below, the Company may classify your omission of that information as deliberate falsification.

Last name: _____ First name: _____ Middle name: _____
 I have no middle name

Other Names/Alias: _____
Include Maiden or Name Changes, No Direct Derivatives Ex: Susan vs. Sue, David vs. Dave

*Social Security: _____ *Date of Birth: _____
**This information will be used for background screening purposes only and will not be used as hiring criteria.*

Race: American Indian or Alaskan Native Asian or Pacific Islander Black Hispanic White Other

Sex: Female Male **Michigan Residency (please circle one):** I have / I have not lived outside of Michigan in the past 10 years

Driver's License Number: _____ DL State of Issuance: _____

**Phone Number: _____ **Email Address: _____
***This information will be used for correspondence related to the background check process when allowable by law*

Present Address: _____

City/State/Zip: _____

Signature: _____ Date: _____