



THE FAMILY YMCA

EMPLOYMENT APPLICATION PACKET

Thank you for your interest in working at The Family YMCA in Los Alamos, New Mexico!

To be considered for a vacant position, please follow these instructions:

1. Fill out this Employment Application Packet *completely*.
2. Scan the forms and email as attachment to: careers@laymca.org or mail your completed Employment Application Packet to: The Family YMCA, Attn: Human Resources, 1450 Iris St., Los Alamos, NM 87544. You may also drop your application off at the YMCA.

If you have any questions, call our Human Resources Specialist at 505-661-9075 or email: careers@laymca.org.

EMPLOYMENT APPLICATION PACKET CHECKLIST:

- ✓ Employment Application
- ✓ Substance/Alcohol Abuse and Testing Policy
- ✓ YMCA Code Of Conduct
- ✓ The Family YMCA's Position on the Nationwide Problem of Child Abuse
- ✓ Notice and Authorization Concerning Consumer and Investigative Consumer Reports

AN EQUAL OPPORTUNITY EMPLOYER AND DRUG FREE WORKPLACE

THE FAMILY YMCA EMPLOYMENT APPLICATION



PLEASE PRINT CLEARLY IN INK

POSITION APPLYING FOR: _____

DATE OF APPLICATION: _____

PERSONAL

LAST NAME		FIRST NAME		MID. INIT.	EMAIL:
HOME ADDRESS		APT. #	CITY	STATE	ZIP CODE
(AREA CODE) TELEPHONE NUMBER		U.S. CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, VISA TYPE AND NUMBER		SOCIAL SECURITY #	IS YOUR AGE: UNDER 18? <input type="checkbox"/> YES <input type="checkbox"/> NO UNDER 21? <input type="checkbox"/> YES <input type="checkbox"/> NO
LIST ANY REASON KNOWN TO YOU, WHY YOU MIGHT NOT BE ABLE TO PERFORM CONSISTENTLY AND PROMPTLY, ANY OF THE DUTIES OF THE POSITION APPLIED FOR. (Please review job description before answering this question.)					
DATE AVAILABLE			WILL YOU ACCEPT ANOTHER POSITION? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE SPECIFY.		
WILL YOU ACCEPT SHIFT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO		WILL YOU ACCEPT WEEKEND WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO		WILL YOU WORK: <input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME <input type="checkbox"/> TEMPORARY	
WERE YOU PREVIOUSLY EMPLOYED AT ANOTHER YMCA? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, WHERE? _____ WHEN? _____ IN WHAT CAPACITY? _____					
HAVE YOU EVER BEEN CONVICTED OF A CRIME? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, GIVE DATE(S), OFFENSE(S) AND DISPOSITION:			DOES A FRIEND/ RELATIVE WORK FOR THE YMCA? <input type="checkbox"/> YES <input type="checkbox"/> NO NAME _____ LOCATION _____ RELATIONSHIP _____		

EMPLOYMENT HISTORY

LIST <u>MOST RECENT</u> POSITION FIRST.		LIST OTHER NAMES USED WHILE EMPLOYED WITH THESE EMPLOYERS.			
FROM MO. YR.	NAME OF EMPLOYER		NAME/TITLE OF LAST SUPERVISOR		TELEPHONE NO.
TO MO. YR.	ADDRESS: STREET	CITY	STATE	ZIP CODE	POSITION HELD
					ENDING SALARY \$ _____ PER _____
BRIEFLY DESCRIBE THE WORK YOU PERFORMED:					
REASON FOR LEAVING:			MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO		
FROM MO. YR.	NAME OF EMPLOYER		NAME/TITLE OF LAST SUPERVISOR		TELEPHONE NO.
TO MO. YR.	ADDRESS: STREET	CITY	STATE	ZIP CODE	POSITION HELD
					ENDING SALARY \$ _____ PER _____
BRIEFLY DESCRIBE THE WORK YOU PERFORMED:					
REASON FOR LEAVING:			MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO		
FROM MO. YR.	NAME OF EMPLOYER		NAME/TITLE OF LAST SUPERVISOR		TELEPHONE NO.
TO MO. YR.	ADDRESS: STREET	CITY	STATE	ZIP CODE	POSITION HELD
					ENDING SALARY \$ _____ PER _____
BRIEFLY DESCRIBE THE WORK YOU PERFORMED:					
REASON FOR LEAVING:			MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO		

PERSONAL REFERENCES

LIST PERSONAL REFERENCES (NO RELATIVES) THAT YOU HAVE KNOWN FOR MORE THAN 1 YEAR.			
NAME		RELATIONSHIP	TELEPHONE NO.
NAME		RELATIONSHIP	TELEPHONE NO.
NAME		RELATIONSHIP	TELEPHONE NO.

EDUCATION

SCHOOL	NAME OF SCHOOL	LOCATION	YRS COMP.	DATES				COURSE OF STUDY	DID YOU GRADUATE?	DIPLOMA/ DEGREE
				FROM		TO				
				MO.	YR.	MO.	YR.			
ELEMENTARY										
HIGH SCHOOL								___ YES ___ NO		
TRADE								___ YES ___ NO		
COLLEGE								___ YES ___ NO		
GRADUATE								___ YES ___ NO		
PROFESSIONAL								___ YES ___ NO		
BUSINESS								___ YES ___ NO		
OTHER								___ YES ___ NO		

LIST HEALTH CARE, BUSINESS, OR INDUSTRIAL EQUIPMENT THAT YOU OPERATE PROFICIENTLY:

PROFESSIONAL LICENSES, REGISTRATION AND/OR CERTIFICATIONS-DO NOT INCLUDE DRIVER'S LICENSE

TYPE	STATE ISSUED	DATE ISSUED	EXPIRES	NUMBER	ELIGIBLE

VOLUNTARY ETHNIC STATUS INFORMATION REQUEST

*We would appreciate you providing the information requested below, however it is entirely voluntary.
The information you provide is strictly confidential and will not be used in the evaluation of your application.*

White <input type="checkbox"/>	Black or African American <input type="checkbox"/>	Hispanic or Latino <input type="checkbox"/>	Asian <input type="checkbox"/>	American Indian or Alaska Native <input type="checkbox"/>	Native Hawaiian or Pacific Islander <input type="checkbox"/>	Two or more races <input type="checkbox"/>
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APPLICANT'S CERTIFICATION

I CERTIFY THAT ALL INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND THAT ANY MISLEADING OR FALSE STATEMENTS WOULD RENDER THIS APPLICATION VOID AND WOULD BE SUFFICIENT CAUSE FOR IMMEDIATE DISMISSAL IN THE EVENT OF EMPLOYMENT.

I UNDERSTAND THAT THIS IS AN APPLICATION FOR EMPLOYMENT AND THAT NO EMPLOYMENT CONTRACT IS BEING OFFERED.

I FURTHER UNDERSTAND THAT AS A CONDITION OF EMPLOYMENT I MAY BE REQUIRED TO SUBMIT TO A CRIMINAL BACKGROUND CHECK AND A DRUG TEST ACCORDING TO YMCA STANDARDS, AND IF EITHER RESULT IS UNSATISFACTORY, I WILL NOT BE ELIGIBLE FOR EMPLOYMENT.

I HEREBY AUTHORIZE THE YMCA TO INVESTIGATE ALL INFORMATION CONTAINED IN THIS APPLICATION AND TO CONTACT FORMER EMPLOYERS TO OBTAIN ANY AND ALL INFORMATION RELATED TO MY PAST WORK PERFORMANCE.

I AGREE, IF EMPLOYED, TO ABIDE BY ALL YMCA RULES AND REGULATIONS. I UNDERSTAND THAT SUCH EMPLOYMENT IS FOR AN INDEFINITE PERIOD OF TIME AND THAT THE YMCA CAN CHANGE WAGES, BENEFITS AND CONDITIONS OF EMPLOYMENT AT ANY TIME.

I HAVE READ AND UNDERSTAND THE ABOVE.

DATE _____ SIGNATURE _____

EMERGENCY CONTACTS

NAME _____ RELATIONSHIP _____ PHONE NUMBER _____

NAME _____ RELATIONSHIP _____ PHONE NUMBER _____

IMPORTANT NOTICE TO ALL APPLICANTS

IF YOU ARE SELECTED FOR EMPLOYMENT YOU MUST BE PREPARED TO VERIFY YOUR ELIGIBILITY TO WORK AS REQUIRED UNDER THE IMMIGRATION REFORM AND CONTROL ACT OF 1986. THIS REQUIREMENT APPLIES TO ALL NEW EMPLOYEES, INCLUDING U.S. CITIZENS, PERMANENT RESIDENTS AND NON-IMMIGRANTS. YOU WILL BE REQUIRED TO PROVIDE DOCUMENTS WITHIN 3 DAYS OF HIRE DATE TO VERIFY YOUR IDENTITY AND ELIGIBILITY TO WORK.

THE FAMILY YMCA IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT UNLAWFULLY DISCRIMINATE ON THE BASIS OF RACE, SEX, AGE, COLOR, SEXUAL ORIENTATION, RELIGION, NATIONAL ORIGIN, MARITAL STATUS, GENETIC INFORMATION, VETERAN'S STATUS, DISABILITY, OR ANY OTHER BASIS PROHIBITED BY FEDERAL, STATE OR LOCAL LAW.

Substance/Alcohol Abuse and Testing Policy



It is the policy of The Family YMCA to ensure a healthy and safe environment free from substance use/abuse within the programs, activities, and premises of the YMCA in accord with its mission statement to promote wellness in spirit, mind and body. The possession, use, manufacturing, or distribution of alcohol and illegal drugs and the illegal possession, use, or distribution of prescription drugs within the programs, activities and premises of The Family YMCA, and other facilities where YMCA programs are held, will not be tolerated. Illegal actions will be reported to the Los Alamos Police Department and to the offices of Drug Enforcement.

Off-the-job illegal drug activity or alcohol abuse could have an adverse effect on an employee's job performance and could jeopardize the safety of other employees, the public, association equipment, and the YMCA's relations with the public, and therefore, will not be tolerated. Under no circumstance should any of our employees possess, use, manufacture, or distribute illegal drugs outside of work hours. Under no circumstance should any of our employees be illegally using or illegally under the influence of alcohol. Employees who violate this policy are subject to disciplinary action, including dismissal.

Each individual associated with The Family YMCA will assume personal responsibility for her own actions. Anyone with knowledge of illegal possession, use, manufacturing, or distribution of illegal drugs or alcohol within YMCA programs, activities, and/or premises is to report the facts of the case to her supervisor, respecting the confidentiality of that communication.

A "zero tolerance" attitude will be enforced. Final decision as to actions taken based upon the facts of each individual case rests with the President of the Board of Directors and the Executive Director of The Family YMCA. Any employee may be requested to be tested for substance or alcohol abuse. Results of these tests will be shared with the appropriate YMCA staff and may be used to determine employment or continued employment .

Employees suspected of involvement in substance abuse will be placed upon suspension without pay until official determination of involvement has been completed. A positive determination will result in immediate termination of employment with forfeiture of all benefits prior to the suspension date. A negative determination will result in reinstatements at the same or equal position. If an employee is charged and awaiting trial for illegal activities, she will be placed on leave without pay until legal determination is completed.

Request for reemployment following drug rehabilitation will be considered on an individual basis with recommendation from the President of the Board of Directors and the Executive Director.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE POLICY

I hereby acknowledge that I have read and understood the above policy and agree to adhere to the policy.

Signature of Applicant

Date

If under 18, signature of parent or guardian

AN EQUAL OPPORTUNITY EMPLOYER AND DRUG FREE WORKPLACE



YMCA CODE OF CONDUCT

“Staff” refers to all YMCA employees, instructors, board members, coaches, assistants, instructor aides, substitutes and volunteers. “Participants” refers to all members, program participants, community service workers, non-YMCA maintenance and construction workers, guests and visitors.

1. Staff will interact with participants and other staff with respect and consideration, treating everyone equally regardless of sex, race, religion, culture, or sexual orientation. The Family YMCA is an equal opportunity employer and supervisors will not discriminate when hiring staff.
2. Staff will portray a positive role model and act in a caring, honest, respectful and responsible manner, maintaining an attitude of patience, courtesy, tact and maturity.
3. While the YMCA does not discriminate against an individual's lifestyle, it does require that staff abide by the standards of conduct set forth by the YMCA in the performance of their job
4. Staff will appear clean, neat, and appropriately attired.
5. Staff will report to work on time as scheduled or notify supervisor.
6. Staff will properly record hours worked and turn in time sheets when due.
7. Staff will not falsify any YMCA records.
8. Staff will carry out job assignments and follow supervisors' instructions.
9. Staff must be free of physical and psychological conditions that might adversely affect participants' physical or mental health.
10. Staff will not discuss confidential matters with anyone outside of the YMCA or with unauthorized employees. Lists of participants, confidential materials, and restricted information will not be removed from the facility or discussed with or shown to anyone under any circumstances without authorization.
11. Staff will not gossip in the work place.
12. Staff will not carry weapons on YMCA property or into YMCA programs.
13. Staff will not steal, or attempt to steal YMCA, members, participants, or staff property.
14. Staff will not intentionally destroy YMCA property or property where YMCA programs are held, or advocate or participate in unlawful seizure of YMCA property or property where YMCA programs are held.
15. Staff will not be on YMCA property during closed hours without authorization from the executive director
16. Staff will not use the Internet inappropriately.
17. Staff will notify the YMCA of a conviction or arrest.
18. Staff will not use profanity, abusive language, tell inappropriate jokes, or share intimate details of personal life in front of members, participants or other staff.
19. Staff will not smoke or use tobacco in the presence of participants. Smoking in and around the YMCA facility and programs is prohibited.
20. Never report to work under the influence of alcohol, intoxicants or drugs. The possession, use, manufacturing, or distribution of illegal drugs, alcohol and/or prescription drugs within the programs, activities and premises of The Family YMCA, and other facilities where YMCA programs are held is prohibited. *Off-the-job* illegal drug activity, as described above, or alcohol abuse, including illegal alcohol use, will not be tolerated.

21. Staff will refrain from intimate displays of affection towards others during working hours.
22. Staff will not engage in sexual, religious, racial, ethnic, or any other kind of harassment towards members, participants, or other staff.
23. Staff will not abuse participants or other staff in any of the following manners: physical abuse - striking, spanking, shaking, slapping; verbal abuse - humiliating, degrading, threatening; sexual abuse - inappropriate touching or verbal exchange, molestation, indecent exposure; mental abuse - shaming, withholding love, cruelty; neglect - withholding food, water, basic care, etc. Any type of abuse will not be tolerated and may be cause for immediate dismissal.
24. Staff will respect participants' rights not to be touched in ways that make them feel uncomfortable. Other than diapering, staff will not touch areas of participants' bodies that would be covered by a bathing suit.
25. Staff will read and sign all policies related to preventing, identifying, documenting, and reporting child abuse, and attend training as instructed by a supervisor
26. Staff ages 18 and over will not date participants ages 17 and under.
27. Staff will not transport participants ages 17 and under in their own vehicles.
28. Staff ages 18 and over will not be alone with participants ages 17 and under outside of the YMCA. This includes babysitting, sleepovers, and inviting youth to staff's home. Staff ages 17 and under will not be alone with participants ages 12 and under outside of the YMCA. Any exceptions require a written explanation before the fact and are subject to administrative approval.
29. Staff will never leave participants ages 12 and under unsupervised
30. At no time during a YMCA program will YMCA staff age 18 and over be alone with a participant age 17 and under. At no time will any YMCA staff be alone with a participant 12 and under.
31. If working with children, staff must use positive techniques of guidance, including redirection, positive reinforcement and encouragement rather than criticism, competition and comparison. Staff will have age-appropriate expectations and set up or follow guidelines that minimize the need for confrontation or discipline. Physical restraint is used only in pre-determined situations (i.e. necessary to protect someone from harm) and must be documented in writing.
32. If working with children, staff will conduct a health check of each participant each day, noting any fever, bumps, bruises, burns, etc. Questions or comments will be addressed to the participant or the participant's parent/guardian in a non-threatening manner. Any questionable marks or responses will be documented.
33. If working with children, staff will not release youth ages 12 and under to anyone other than an authorized individual on file with the YMCA.
34. If working with children, staff will conduct or supervise private activities for participants, such as diapering, putting on bathing suits, taking showers, etc., in pairs. When this is not feasible, staff will be positioned so they are visible to others.

I understand the above list is illustrative of the type of conduct that is expected, but not inclusive of all conduct that is not tolerated. The Employee Handbook provides further guidance of rules and regulations (see Discipline Policy, pg. 21) I understand that any violation of this Code of Conduct may result in termination.

Employee Signature

Date

If under 18, parent/guardian signature

Date

The Family YMCA's Position on the Nationwide Problem of Child Abuse



The Family YMCA makes every effort to prevent child abuse. Some examples include, but are not limited to:

- A thorough background check, including but not limited to, criminal background checks, references of past employers, personal references, the military, educational institutions, volunteer organizations, civic groups, personal character and extra-curricular activities.
- Convicted or registered sex offenders are excluded from membership, employment, volunteering and program participation at the YMCA. Offenders are not allowed onto YMCA property or to loiter in the vicinity of YMCA programs and activities.
- The Family YMCA does not condone child abusers and this YMCA will be seeking information in an applicant's background related to child abuse.
- Allegations or suspicions of child abuse are taken seriously and will be reported to the State/local authorities for investigation.
- Programs are structured so that no staff member is left alone with children.
- All staff and volunteers must undergo Child Protection Training.
- Periodic interviews and evaluations are conducted with children and parents about day to day experiences, encouraging reports of anything out of the ordinary.
- Staff will not fraternize with children outside the programs, including baby-sitting or inviting children home.
- Testing for illegal substances.

The Family YMCA's goals for all programs are:

- To support and strengthen the family unit.
- To help children develop to their fullest potential.
- To deliver the program in a positive YMCA environment of safety, support, and care.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE CHILD ABUSE PREVENTION STATEMENT.

I certify that I have read the above statement and accept the same as a condition of my employment with The Family YMCA.

Signature of Applicant _____ Date _____

IF UNDER 18, parent/guardian signature _____

Notice and Authorization Concerning Consumer and Investigative Consumer Reports

This form, which you should read carefully, has been provided to you because The Family YMCA ("Organization") may request a criminal background report in connection with your application for employment, or at any time during the course of employment with the Organization, if any, for purposes of evaluating your suitability for employment, promotion, reassignment or retention as an employee. Additionally, in the event that claims or disputes between you and The Family YMCA are filed with any third parties, the organization may request investigative reports for purposes of evaluation and response, regardless of whether you remain in the employ of the Organization at the time such claims or disputes arise.

The types of reports that may be requested from lexisnexis.com or other registry under this policy include, but are not limited to, criminal records checks including sex offender registries, court records checks, driving records, and/or summaries of educational and employment records and histories, and credit checks. **Please note:** The YMCA will maintain the complete confidentiality of all information obtained through criminal background checks, reference checks, and all information on application forms, including information regarding disqualification decisions.

The Family YMCA will not discriminate against any person on the basis of race, color, creed, sex, religion, age, disability, national origin, citizenship, or marital status.

Authorization

I have carefully read and understand this notice and authorization form and, by my signature below, consent to the release of criminal background search reports, as defined above, to The Family YMCA (1) in conjunction with my application for employment, (2) during the entire course of my employment, if any, and (3) after any such employment ends. I further understand that any and all information contained in my job application or otherwise disclosed to the YMCA by me before, during or after my employment, if any, may be utilized for the purpose of obtaining the criminal background search reports requested by the Organization and confirm that all such information provided in connection with my application is true and correct. I understand and acknowledge that nothing in this notice and authorization is intended to be, or is, a guarantee of employment or a promise of continued employment. If employed by the YMCA, my employment will not be for a specified period of time and can be terminated at any time for any reason, with or without cause or notice, by me or by The Family YMCA.

Name (printed)

*Social Security number

Full address, including ZIP code

*Date of birth (mm/dd/yy)

Signature

Date

* required

For office use only:

Department

Minor? ___Yes ___No