



**YMCA of Eastern Ontario  
Employment Application – Appendix F**

*Building healthy  
communities*

**Instructions**

- Please complete all sections as thoroughly as possible, even if you are attaching a resume.
- A clear understanding of your background and work history will aid us in considering you for a position which best meets your qualifications.
- The offer of any position with the YMCA is conditional upon the presentation of a satisfactory Criminal Reference Check.

Office Use Only - Date Received

**Personal Information**

Last Name	First Name	Telephone:
Is your age at least 16 years? <input type="checkbox"/> Yes <input type="checkbox"/> No      Email: _____		
Eligible to work in Canada? <input type="checkbox"/> Yes <input type="checkbox"/> No		

**Personal Information**

Type of position being applied for:     Full-time Permanent       Part-time Permanent       Summer/Seasonal

Facility location desired:       Brockville YMCA       Kingston YMCA       Other: \_\_\_\_\_

Area of employment desired:     Day Care       Membership Services       Aquatics  
 School-Age Care       Fitness       Cleaning & Facilities  
 Administration       Camps / School Break Programs       Child & Youth

Are you responding to an advertised position?     Yes     No      Job Title: \_\_\_\_\_

Have you previously worked for a YMCA?     Yes     No      Location: \_\_\_\_\_

**Times Available to Work**

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
From							
To							

Highest level of education received: \_\_\_\_\_

If you expect to complete an educational program in the near future, please describe? \_\_\_\_\_

\_\_\_\_\_ Anticipated Completion Date: \_\_\_\_\_

**Language**

English       Spoken     Written  
 French       Spoken     Written  
 Other \_\_\_\_\_       Spoken     Written

**Certifications & Training**

Standard First Aid with CPR C     National Lifeguard     Bronze Cross       Personal Trainer     Swim Instructor  
 Individual Conditioning       Fitness Instructor     Child & Youth Diploma     Early Childhood Educator

Please list any other relevant certifications or designations: \_\_\_\_\_

\_\_\_\_\_



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*Employment History	
<b>Name of Current / Recent Employer</b>	
Job Title	Type of Business
Period of Employment	From: To:
Duties and Responsibilities	
Name of Supervisor	Email Telephone
Reason for Leaving	
<b>Name of Current / Recent Employer</b>	
Job Title	Type of Business
Period of Employment	From: To:
Duties and Responsibilities	
Name of Supervisor	Email Telephone
Reason for Leaving	
<b>Name of Current / Recent Employer</b>	
Job Title	Type of Business
Period of Employment	From: To:
Duties and Responsibilities	
Name of Supervisor	Email Telephone
Reason for Leaving	
References – *Please provide three professional references	
Name	Relationship
Email	Phone
Name	Relationship
Email	Phone
Name	Relationship
Email	Phone
<p><i>I hereby certify that the above information is true and complete to the best of my knowledge. I understand that if any information in this application or attachments/resume is found to be untrue or incomplete, my application may be rejected or I may be dismissed in the event that I am employed by the YMCA of Eastern Ontario.</i></p> <p><i>*By providing names and contact information, I am authorizing the YMCA permission to contact the person or organization listed to obtain reference information, including information contained in my personnel file(s) or medical or legal records where appropriate. The persons listed above are authorized to disclose such information to the YMCA, with the following exceptions or limitations: _____</i></p> <p>_____.</p>	
Signature	Date: month / day /year