

**Corona-Norco Family YMCA**

1331 River Road  
Corona, CA 92880  
Phone: (951) 736-9622 Fax: (951) 736-6759



**EMPLOYMENT APPLICATION**

THE CORONA-NORCO FAMILY YMCA IS AN EQUAL OPPORTUNITY EMPLOYER

**PERSONAL INFORMATION:** (Please Print)

Are you 18 years of age or older?

Yes  No

Date of Application: \_\_\_\_\_

\_\_\_\_\_  
Name (Last, first, middle initial)

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City and State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Home Telephone Number

\_\_\_\_\_  
Mobile/Cell Telephone

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
How were you referred to our facility? (Please be specific)

**Employment Authorization**

If hired, you will be asked to provide documentation that verifies your legal right to work in the United States. If you are unable to provide acceptable documentation the Association cannot employ you. Can you provide such documentation?  Yes  No

\_\_\_\_\_  
Have you ever been convicted of a felony?  Yes  No

If yes, please explain. *Conviction does not automatically exclude an applicant from consideration for employment. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.*

**POSITION INFORMATION:** (Please Print)

\_\_\_\_\_  
Position Desired

\_\_\_\_\_  
Starting Salary Desired

Available to work (check all that apply)

Full Time

Part Time

Seasonal or Temporary Work

\_\_\_\_\_  
What hours and days of the week are you available for work?

\_\_\_\_\_  
If hired, on what date can you begin work?

\_\_\_\_\_  
Describe any training or special experience related to the position for which you are applying:

\_\_\_\_\_  
Why do you want to work for the YMCA? (Please be specific)



**EDUCATION** School or Institution – (Please Print)

<u>Institution</u>	<u>Name</u>	<u>Location (City and State)</u>	<u>Number of Years Completed</u>	<u>State Diploma or Degree Earned</u>
High School				
Jr. College or Trade School				
College or University				
Certificates or Other				

Are there any other experiences, skills or qualifications that would especially fit you for work with the YMCA? (ECE credits, First Aid CPR certification, etc.)

**EMPLOYMENT RECORD** (Start with your present or most recent employment and include periods of U.S. Military Service)

Employer Address (street, city, zip code) Telephone

Supervisor's Name and Position Dates of Employment From: To:

Your Position and Job Duties

Reason for Leaving May we contact now?  Yes  No

Employer Address (street, city, zip code) Telephone

Supervisor's Name and Position Dates of Employment From: To:

Your Position and Job Duties

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Reason for Leaving May we contact now?  Yes  No



**PROFESSIONAL REFERENCES** List three persons who have knowledge of your work performance within the last 3 years

(Please Print)

First <u>and</u> Last Name	Company Street Address, City, State, Zip Code	Work Telephone Number	Number of Years Acquainted
1.			
2.			
3.			

**PERSONAL REFERENCES** List below three persons who are former employers or friends

(Please Print)

First <u>and</u> Last Name	Street Address, City, State, Zip Code	Telephone Number	Number of Years Acquainted
1.			
2.			
3.			

The following pages request information for specific positions. You should only answer the questions in the section(s), which are applicable to the positions(s) for which you are applying. For example:

- Section 1     Child Care Applicants  
Preschool Teacher, School-Age Teacher, Preschool Teacher's Aide, School-Age Teacher's Aide, Lead Teacher Preschool, Lead Teacher School-Age, Site Supervisor.
  
- Section 2     Driver Applicants  
Van Driver, Youth Bus Driver
  
- Section 3     Clerical/General Office Applicants  
Front Lobby Receptionist, Administrative Assistant, Accounting Clerk, Office Manager
  
- Section 4     Aquatic Applicants  
Lifeguard, Swim Instructor
  
- Section 5     Physical Education Applicants  
Fitness Instructor, Aerobics Instructor, Gymnastics Instructor

If you have questions regarding which sections(s) to complete, please ask a Corona-Norco Family YMCA staff person.



**SECTION 1**

**Child Care Applicants**

1. What particular habits and/or mannerisms cause you irritation in dealing with children or adults?  
\_\_\_\_\_  
\_\_\_\_\_
2. What positive experiences are you expecting to have working with children and/or adults at the Corona-Norco Family YMCA?  
\_\_\_\_\_  
\_\_\_\_\_
3. What are your goals and philosophies with respect to child care and child development?  
\_\_\_\_\_  
\_\_\_\_\_
4. What qualities in yourself do you feel would contribute to the overall success of our child care program?  
\_\_\_\_\_  
\_\_\_\_\_
5. In what ways do you feel children can benefit from being enrolled in a child care experience?  
\_\_\_\_\_  
\_\_\_\_\_
6. List all the activities for which you are qualified to instruct (i.e., sports, crafts, etc.)
 

A _____	G _____
B _____	H _____
C _____	I _____

**SECTION 2**

**Driver Applicants**

California Driver's License information: Class: \_\_\_\_\_ PS Endorsement: Yes \_\_\_\_\_ No \_\_\_\_\_ Expiration Date: \_\_\_\_\_

California Special Driver Youth Bus Certificate: Yes \_\_\_\_\_ No \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Medical Examiner's Certificate: Yes \_\_\_\_\_ No \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Driver applicants are required to provide a current Driver License/ID Card Information (H6 Report) available through the California Department of Motor Vehicles. Are you willing to do so? Yes \_\_\_\_\_ No \_\_\_\_\_

List traffic convictions in the past three years: (Attach a separate sheet of paper, if additional space needed)

Date: \_\_\_\_\_ City, State: \_\_\_\_\_ Description of Conviction: \_\_\_\_\_

Have you ever been denied a license, permit or privilege to operate a motor vehicle? \_\_\_\_\_ If YES please explain:

Do you possess a current First Aid/CPR Certificate: Yes \_\_\_\_\_ No \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**SECTION 3**



**Clerical/General Office Applicants**

Do you possess general computer skills? Yes\_\_\_\_\_ No\_\_\_\_\_

Are you experienced with Internet Use? Yes\_\_\_\_\_ No\_\_\_\_\_

Are you experienced in Microsoft Word? Yes\_\_\_\_\_ No\_\_\_\_\_

Skill Level: Some Knowledge\_\_\_\_\_ Solid Working Knowledge\_\_\_\_\_ Advanced Knowledge\_\_\_\_\_

Are you experienced in Microsoft Excel? Yes\_\_\_\_\_ No\_\_\_\_\_

Skill Level: Some Knowledge\_\_\_\_\_ Solid Working Knowledge\_\_\_\_\_ Advanced Knowledge\_\_\_\_\_

State any other computer programs, i.e. QuickBooks, Power Point, etc. with which you have working knowledge:

\_\_\_\_\_

What is your typing speed? \_\_\_\_\_

Can you operate 10-key by touch? Yes\_\_\_\_\_ No\_\_\_\_\_

State all office equipment and machines of which you have working knowledge:

\_\_\_\_\_

\_\_\_\_\_

**SECTION 4**

**Aquatic Applicants**

Please list Aquatic Red Cross, YMCA and Lifeguard Certifications:

A. \_\_\_\_\_ Expiration Date: \_\_\_\_\_

B. \_\_\_\_\_ Expiration Date: \_\_\_\_\_

C. \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Have you ever worked/volunteered as a Lifeguard? Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, please complete the following:

Location: \_\_\_\_\_ Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

Have you ever instructed swimming? Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, please complete the following:

Location: \_\_\_\_\_ Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

What age group do you prefer teaching and why? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**SECTION 5**

**Physical Education Applicants**

Please list all related certifications:

- 1. \_\_\_\_\_ Expiration Date: \_\_\_\_\_
- 2. \_\_\_\_\_ Expiration Date: \_\_\_\_\_
- 3. \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Have you ever instructed a group/class in an area for which are certified? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please complete the following:

Location: \_\_\_\_\_ Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

**Please Read Carefully Before Signing This Application**

I hereby certify that all information contained in this application (and on my resume and any attachments to this form) is true and correct to the best of my knowledge. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I understand that nothing contained in the application or conveyed during any interview, which may be granted or during my employment, if hired, is intended to create an employment contract. I further understand that employment is at-will. Either the employee or the employer may terminate employment at any time with or without cause and with or without notice.

I understand and agree my employment may be subject to satisfactory responses to background and reference checks the YMCA, at the YMCA's discretion, may determine it needs to make, and I waive any objection to the YMCA making any such checks.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date