

Quick Application for Cheerio Adventures 2010

NAME:	AGE:	SEX:	DATE:
ADDRESS:		CITY/ST:	ZIP:
CELL PHONE:	EMAIL:		

All About You

Where Do You Attend School: School: _____ Year: _____

Work Dates Available: Spring Apr. 7-May14 2010, Summer May 25-Aug 8, 2010, Fall Aug 25-Oct 30, 2010 , or All 3 seasons

Desired Job: Fall and Spring Position as Adventure Education Instructor: _____ Summer: Trip Leader _____

Any previous camp experience: _____ If yes, where?

Please describe any awards or special recognition you have received at work, school, or as a volunteer.

Indicate any special skills and interests such as the arts, sports, aquatics, climbing, nature, or other.

Please list any certifications AND expiration dates.

Please tell us why you want work as an Adventure Education Instructor or Trip Leader and with children.

Please list and print clearly your past three employers with complete information so that we may contact them.

Name of Supervisor	Place of Employment	Phone Number/and e-mail	Year(s) of Employment & Reason for Leaving

Please provide four completed references I can contact in the next week, including one family member.

PLEASE PRINT CLEARLY

NAME	Relationship	Mailing Address	Phone Number and e-mail

Additional Information

Some of the following questions may seem offensive or private; however, children deserve the best role models as their counselors. Since you would have a direct influence on their lives, we feel these are necessary questions.

Do you smoke? Yes No Use of other forms of tobacco? Yes No

Do you use alcoholic beverages? No Rarely Occasionally Weekly

Have you ever been treated for a chemical dependence? Yes No If yes, elaborate:

Have you ever been asked to leave or resign from a previous job held? Yes No If yes, elaborate:

Have you ever been convicted of a felony? Yes No If yes, please elaborate with charge, year, and conviction.

Have you ever been convicted of any crime related to abuse or sexual acts of any nature? Yes No
If yes, please elaborate:

STATEMENT OF APPLICANT

In the High Point YMCA's effort to attract the highest quality staff, I understand that as a part of the application process for employment with the YMCA, an extensive inquiry will be made concerning my prior employment, activities, character and health, and I fully consent to and authorize all such inquiries. In the event of my employment by the High Point YMCA, I will comply with all policies set forth in the personnel manual and with other policies established from time to time by the organization. I authorize that YMCA to obtain a criminal history record check and request my employment record from any former employer(s). I further understand that inquiries may be made, concerning my background, experience and prior employment. I hereby waive any right to claim that any request or investigation is an invasion of my privacy, since they are made with my consent and it is in my interest that I be considered for employment. I understand that my continued employment may be contingent upon a criminal history background check. I certify that all statements made by me on this application are true to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand and agree that any misrepresentation or omission of facts would exclude my being considered for employment or after employment, may be cause for termination of employment with the YMCA. I understand that the YMCA will take any allegations or suspicions of child abuse seriously and will report such allegations to the police and state agencies for investigation. I also understand that if hired as a YMCA employee or volunteer, I am not allowed to fraternize with YMCA youth members or participants outside the YMCA programs. I understand and agree that if I am employed, there is no contract period for employment and my employment would be solely an "employment at will" giving either me or the YMCA the right to terminate my employment at any time without liability or obligation except for my regular pay through the date of termination. I hereby acknowledge that I have read and understood the above statement and that I voluntarily sign this application.

Please Type Name:

Date:

By typing of your name you have electronically signed this statement and will be held to its parameters.

We are an Equal Opportunity Employer, committed to valuing diversity and practicing inclusion.

[PLEASE ATTACH A RESUME IF AVAILABLE.](#)

PLEASE FILL OUT AND MAIL OR FAX IT TO:

Andrea K. Galioto-Evans, Associate Director
1430 Camp Cheerio Road
Glade Valley, NC 28627

Phone : 336-363-2604

Fax: 336-363-3671