



## Employment Application

Thank you for considering the YMCA of the Cayman Islands to offer your time and talents. Please complete the following information as clearly and thoroughly as possible, verifying all information provided is true and correct.	
LAST NAME:	FIRST NAME:
STREET ADDRESS:	PO BOX:
DISTRICT/POSTAL CODE:	EMAIL ADDRESS:
BIRTH DATE:	GENDER:
	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
DAY TIME PHONE:	EVENING PHONE:
<b>PROVIDE YOUR WORK STATUS ON THE ISLAND:</b>	
<input type="checkbox"/> CAYMANIAN <input type="checkbox"/> OTHER, Please Explain:	
<b>**ALL APPLICANTS MUST PROVIDE A POLICE CLEARANCE**</b>	
<b>EMERGENCY CONTACT INFORMATION</b>	
NAME:	STREET ADDRESS:
CONTACT PHONE:	RELATIONSHIP TO APPLICANT:
<b>POSITION INFORMATION</b>	
SPECIFIC POSITION(S) & SITE LOCATION APPLYING FOR:	
DESCRIBE SPECIAL SKILLS, TRAININGS OR CERTIFICATIONS APPLICABLE TO THE POSITION APPLYING FOR:	
WHY ARE YOU MOST INTERESTED IN WORKING FOR THE YMCA?	
AVAILABLE DATE TO BEGIN EMPLOYMENT:	
DAYS OF WEEK & TIME OF DAY AVAILABLE:	

<b>EDUCATION, EMPLOYMENT, BACKGROUND INFORMATION &amp; REFERENCES</b>		
LIST ALL LEVELS OF EDUCATION COMPLETED	DIPLOMA / CERTIFICATE RECEIVED - DATE	
CURRENT/MOST RECENT EMPLOYER NAME:	ADDRESS/PHONE:	
NAME & TITLE OF SUPERVISOR:	YOUR TITLE/POSITION HELD:	
DATES OF EMPLOYMENT	REASON FOR LEAVING	
PREVIOUS EMPLOYER NAME:	ADDRESS/PHONE:	
NAME & TITLE OF SUPERVISOR:	YOUR TITLE/POSITION HELD:	
DATES OF EMPLOYMENT	REASON FOR LEAVING	
PREVIOUS EMPLOYER NAME:	ADDRESS/PHONE:	
NAME & TITLE OF SUPERVISOR:	YOUR TITLE/POSITION HELD:	
DATES OF EMPLOYMENT	REASON FOR LEAVING	
HAVE YOU EVER BEEN CONVICTED OF OR PLED GUILTY TO A CRIMINAL OFFENSE? <input type="checkbox"/> NO <input type="checkbox"/> YES, if yes, please provide the date(s) and type of offense(s), disposition and other significant details:		
<hr/> <i>A conviction will not automatically prevent you from employment. The nature, severity and date of offense in relation to the position for which you are applying will be considered; consequently, we do need the facts relative to the conviction(s).</i>		
<b>PLEASE LIST TWO WORK AND ONE PERSONAL REFERENCE:</b>		
NAME:	PHONE NUMBER:	RELATIONSHIP
NAME:	PHONE NUMBER:	RELATIONSHIP
NAME:	PHONE NUMBER:	RELATIONSHIP
<b>PHOTO RELEASE:</b> I grant permission to the YMCA to use photos/videos taken of me for publication in any form to promote YMCA activities.		
<input type="checkbox"/> I have read and agree to the Photo Release		
<ol style="list-style-type: none"> <li>1. The use of illegal drugs, tobacco and/or alcohol is prohibited at any time during any YMCA programme, activity or event.</li> <li>2. The information that I have provided may be verified and I give permission to the YMCA of the Cayman Islands to make inquiries from others, which includes a criminal background check to determine my suitability to act as a YMCA employee.</li> <li>3. In the course of my relationship with the YMCA, I may encounter confidential information and I agree to keep said information in the strictest confidence.</li> <li>4. The relationship between the YMCA and its' staff is based upon satisfactory performance and representation of the YMCA and may be terminated at any time for discretionary reason. Additional information will be provided regarding personnel policies upon hire.</li> </ol>		
<input type="checkbox"/> I affirm that I have read the above and that the information I have provided is true and complete. I agree to abide by the policies, procedures, guidelines and stipulation of behavior while employed by the YMCA of the Cayman Islands.		
PRINTED NAME OF APPLICANT:	SIGNATURE OF APPLICANT:	

