

YMCA OF GREATER INDIANAPOLIS

615 N. Alabama Street
Indianapolis, Indiana 46204
(317) 266-9622

Pre Employment Application

An Equal Opportunity Employer

PERSONAL INFORMATION

Name _____ Date _____ Social Security # _____

Street Address _____ Phone # (_____) _____

City _____ State _____ Zip Code _____ E-mail Address _____

If related to anyone in our employ or a board member, state name and branch _____

How did you learn about this position/employment opportunities with the YMCA? _____

EMPLOYMENT DESIRED

Position _____ Date you can start _____ Wages desired _____

Are you employed now? _____ Yes _____ No Have you ever applied or worked for the YMCA before? _____ Yes _____ No

If yes, where? _____ When? _____

EDUCATION

EDUCATION	NAME AND LOCATION OF SCHOOL	YEARS ATTENDED	DEGREE/MAJOR
High School			
College			
Graduate School			

Special Skills: _____

Can you work afternoon or evening shifts? _____ Yes _____ No Birth date if under 18 years of age _____

U.S. Military Service? _____ Yes _____ No If yes, military duties _____ Rank _____

FORMER EMPLOYER

DATE Month & Year	List below your employment, starting with last one first. NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
From:	Name _____			
To:	Address _____ City _____ State _____ Zip _____ (_____) _____ Phone _____ Supervisor _____			
From:	Name _____			
To:	Address _____ City _____ State _____ Zip _____ (_____) _____ Phone _____ Supervisor _____			
From:	Name _____			
To:	Address _____ City _____ State _____ Zip _____ (_____) _____ Phone _____ Supervisor _____			

Outdoor & Environmental Education FLAT ROCK STAFF APPLICATION

Temporary Address:	Name: _____	E-mail: _____
	(valid until _____)	Phone: _____
		Cell: _____
Are you:	<i>18 years or older?</i> Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>21 or older?</i> Yes <input type="checkbox"/> No <input type="checkbox"/>

Dates Available (<i>from when to when?</i>)

CERTIFICATIONS		
<i>Please submit copies of all cards with your application.</i>		
Certification	Agency (ex. "Am. Heart Assoc.")	Expiration (month/year)

Help us identify your program skills. Choose as many as you like.
 1 = Will lead an activity 2 = Can assist with an activity 3 = Vaguely recall seeing it somewhere...

Alpine Tower II		Habitats		Outdoor Living Skills	
Archaeology		Herpetology		Pond Ecology	
Archery		Human Impact		Rappelling	
Arts & Crafts		Indiana Trail/Pioneer Life		River Ecology	
Birding		Initiatives/Group Games		Rock Climbing	
Canoeing		Insects		Underground Railroad	
Fen Ecology		Low Ropes Facilitator		Wild Edibles	
Fishing		Meteorology		Other:	
Forest Ecology		Native American Games		Other:	
Geology		Orienteering		Other:	

Please complete and send to:
"OEE Staff Application"
Flat Rock River YMCA Camp
6981 West County Road 650 North
St. Paul, Indiana 47272

765-525-6730
888-828-9622
Fax: 765-525-2265
www.flatrockymca.org



EQUAL EMPLOYMENT OPPORTUNITY INFORMATION

It is this Company's policy to provide equal employment opportunities to all employees and applicants for employment in accordance with all applicable laws, directives and regulations of federal, state and local governing bodies. It is our policy to recruit, hire, train and promote individuals in all employment positions without regard to race, color, religion, sex, national origin, age, veteran status or disability.

The following information is being requested so that we may comply with the law and the Company's Equal Employment Opportunity/Affirmative Action program. **COMPLETION OF THIS FORM IS VOLUNTARY.** No adverse treatment will result from your refusal to provide this information. This information will only be used for statistical analyses and compliance reporting. It will be separated from your application before you are considered for possible employment and will not be placed in your personnel file.

PLEASE PRINT ALL INFORMATION

Name (Last, First, Middle)

Social Security No.

POSITION HELD OR FOR WHICH APPLIED:

Sex: Male _____ Female _____

Race/Ethnic designation: **(Check one. Please see reverse side for definitions.)**

_____ American Indian or Alaska Native (Not Hispanic or Latino)

_____ Asian (Not Hispanic or Latino)

_____ Black or African American (not Hispanic or Latino)

_____ Hispanic or Latino

_____ Native Hawaiian or Other Native Pacific Islander (Not Hispanic or Latino)

_____ Two or More Races (Not Hispanic or Latino)

_____ White (Not Hispanic or Latino)

Signature

Date