



SHERIDAN COUNTY YMCA

417 North Jefferson
Sheridan, WY 82801
(307) 674-7488



APPLICATION FOR EMPLOYMENT

Today's Date: _____

We are an Equal Opportunity Employer. Applicants for all job openings are welcome and will be considered without regard to race, color, religion, national origin, sex, age, sexual orientation, physical or mental disability, or any other basis protected by state, federal or local law. It is the intent of the Organization to comply with all applicable federal, state and local legislation concerning equal opportunity in employment.

To help us learn about your experience, abilities, and interests, please complete this Application for Employment as thoroughly as possible.

PERSONAL INFORMATION

Name (please print or type): _____		
	Last	First
	Street	Apt. #
	City	State
	Street	Apt. #
	City	State
	Street	Apt. #
	City	State
Address:		Middle Number of years at present address?
Previous address:		Number of years at previous address?
Phone Number	If necessary for the position applying for, are you over the age: 15 18 21 Can you, after employment, submit verification of your legal right to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Cell #	If hired, do you have a reliable means of transportation to get to work?	
Do you have pending cases or have you ever been convicted of a misdemeanor, felony, child abuse or sex-related crime? If yes, please explain: <small>(A conviction will not necessarily disqualify you.)</small>		
<input type="checkbox"/> yes <input type="checkbox"/> no		

EMPLOYMENT DESIRED

Type of position desired:	Date available to start	Salary desired
Are you presently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No Where?		
If yes, may we contact your current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Why?		
Days and times you are available to work.		
Have you ever applied at this Organization before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when?	Have you ever been employed by this Organization before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when?	
Please comment on personal qualities that would qualify you for this position:		
Do you have any physical condition(s) which may limit your ability to perform the job applying for?		
<small>(attach additional sheet if necessary)</small>		

