



**YWCA OF GREATER MEMPHIS
APPLICATION FOR EMPLOYMENT**

The YWCA of Greater Memphis is an equal opportunity employer.

Name _____ Date _____
 First Middle Last

Address _____
 Street City State Zip

Telephone _____ Social Security # _____

E-mail Address _____ Position Applying For _____

Salary Request _____ Date Available _____

Education
High School _____
 Name Highest Grade Completed Date of Attendance or Diploma

College/University/Other Educational Institutions

Name	Dates Attended	Major	Minor	Degree/Year
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

List any additional training education, certification or experience related to the position for which you are applying:

Employment: (List your present and most recent employer first.)

Employing Firm _____ Dates of Employment From ____/____/____ to ____/____/____

Address _____ Position Title _____

Telephone _____ Supervisor _____ Final Salary _____ Per _____

Reason for Leaving _____

Duties and Responsibilities _____

May we contact your present employer? Yes _____ No _____

Employing Firm _____ Dates of Employment From ____ / ____ to ____ / ____
Address _____ Position Title _____
Telephone _____ Supervisor _____ Final Salary _____ Per _____
Reason For Leaving _____
Duties and Responsibilities _____

Employing Firm _____ Dates of Employment From ____ / ____ to ____ / ____
Address _____ Position Title _____
Telephone _____ Supervisor _____ Final Salary _____ Per _____
Reason For Leaving _____
Duties and Responsibilities _____

Can you provide proof of eligibility to work in the United States of America? Yes ___ No ___
Do you have a relative currently employed with the YWCA of Greater Memphis? Yes ___ No ___
If so, please give name and location of work: _____
Have you ever been convicted of a crime other than a minor traffic violation? Yes ___ No ___
If so, specify type conviction, when or where: _____

What previous contact have you had with the YWCA? _____

References: (Include at least two business professionals, preferably in this locale, who are not related to you by birth or marriage.)
Name _____ Relationship _____
Address _____ Telephone _____
Name _____ Relationship _____
Address _____ Telephone _____
Name _____ Relationship _____
Address _____ Telephone _____

YWCA is an "at-will" employer, and employment may be terminated at any time with or without cause. No information distributed or representations made by any representative of this organization should be construed as an attempt to alter the "at will" status of this position unless a contract is entered which specifically addresses and replaces its "at-will" employment status.

I certify the above information to be true and correct and that any misrepresentations could be grounds for non-hire or termination. I further give permission to contact employers and references shown. This application becomes the property of the YWCA of Greater Memphis upon completion.

Signature _____ Date _____
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RECRUITMENT QUESTIONNAIRE

Please indicate how you learned about the job with the YWCA of Greater Memphis. Check all which apply.

_____ YWCA
_____ Employee
_____ Volunteer
_____ Internal Posting
_____ National
_____ Program Participant
_____ Other

_____ Newspaper
_____ Commercial Appeal
_____ Tri-State Defender
_____ Other _____

_____ Tennessee Employment Security

_____ College Placement Office
_____ University of Memphis
_____ University of Tennessee
_____ LeMoyne Owen
_____ Christian Brothers
_____ Shelby State
_____ State Technical Institute
_____ Rhodes College
_____ Other _____

_____ Private Employment/Temporary Service _____
_____ Other Social Service Agency _____
_____ External Job Postings _____
_____ Other Job Training Program _____
_____ Other _____

AFFIRMATION ACTION INFORMATION

The following information will be used for statistical purposes only.

SEX _____ National Origin _____

RACE: American Indian _____ Spanish Surname _____
Asian American _____ White _____
Black American _____ Other _____

Position for which you are apply _____

Date _____

**CRIMINAL BACKGROUND CHECK
AUTHORIZATION**

NAME (Print) _____

DATE OF BIRTH _____

SOCIAL SECURITY NUMBER _____

MAIDEN NAME (If Female) _____

ADDRESS _____

CITY/STATE/ZIP CODE _____

By signing this form, I authorize the YWCA of Greater Memphis to conduct a thorough Criminal Background check on me.

Signature _____ Date _____

for office use only

DATE

CBC Submitted

DATE

CBC Report Received