



YWCA Carlisle  
301 G Street  
Carlisle, PA 17013

Please Type or Print

DATE OF APPLICATION \_\_\_\_\_

Position Desired \_\_\_\_\_ Date Available \_\_\_\_\_

**Type of Employment**

\_\_\_\_\_ Full-Time    \_\_\_\_\_ Part-Time    \_\_\_\_\_ Volunteer

**Personal Data**

Name \_\_\_\_\_  
Last First M.I.

Address \_\_\_\_\_  
Street City State Zip Code

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone(\_\_\_\_) \_\_\_\_\_

Permanent Address (if different than current address):  
\_\_\_\_\_

Do you have the legal right to work in the U.S.A.? Yes\_\_\_\_ No\_\_\_\_  
(Proof of citizenship or legal work permit will be required if employed.)

**Availability:**

**Monday**\_\_\_\_ **Tuesday**\_\_\_\_ **Wednesday**\_\_\_\_ **Thursday**\_\_\_\_  
(Mark the days you are available between 3:30-5:45)

**Education**

**Schools**                      **City/State**                      **Years Attended**                      **Degree/Certificate**

*High School*

\_\_\_\_\_  
\_\_\_\_\_

*College(s)*

\_\_\_\_\_  
\_\_\_\_\_

## Employment

Please list last two positions starting with your current (or immediate past) employer

**Employer** \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Name Phone Number

Address \_\_\_\_\_  
Street City, State Zip Code

Title of Position \_\_\_\_\_ Final Salary \_\_\_\_\_

Dates From \_\_\_\_\_ To \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Position Responsibilities \_\_\_\_\_

---

**Employer** \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Name Phone Number

Address \_\_\_\_\_  
Street City, State Zip Code

Title of Position \_\_\_\_\_ Final Salary \_\_\_\_\_

Dates From \_\_\_\_\_ To \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Position Responsibilities \_\_\_\_\_

---

## Additional Experiences

List additional experiences that enhance your candidacy.

---

---

---

## Activities

Please list relevant volunteer experience and current professional memberships.

---

---

**References**

List employment references (i.e. supervisors)

Name	Company	Occupation/Title	Phone. No.
_____	_____	_____	_____
_____	_____	_____	_____

**Required Clearances**

As a potential employee of YWCA Carlisle, you *may* be required to provide the following clearances. Please note: The applicant will be responsible for all fees associated with obtaining the required clearances.

FBI Clearance: "Fingerprint check" - (\$22)

Act 34: "Request for criminal record check" (PA) - (\$22)

Pennsylvania Child Abuse History Clearance - (\$13)

**Please read the following statements closely:**

The information I have provided on this application is accurate and complete to the best of my knowledge.

If employed, any misstatement or omission of facts may result in my dismissal.

I authorize the organizations, schools, or persons named in this application to provide YWCA Carlisle with any pertinent information regarding my employment or academic history. I hereby release those organizations, schools, or persons from any liability for any damage whatsoever as a result of issuing this information.

I understand that YWCA Carlisle is an at-will employer. If employed, I understand that either party may terminate the employment at any time.

In the event an offer of employment is made, the offer will be subject to my providing documentation proving identity and eligibility for employment in the United States as required by the Immigration Reform and Control Act of 1986.

In the event an offer of employment is made, I understand I am responsible for obtaining the necessary clearances (criminal, child abuse and FBI), if applicable.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date