

YMCA-YWCA of Winnipeg Employment/Volunteer Application Form

*****APPLICATIONS MUST BE COMPLETED IN HANDWRITING*****

Please note that a current Police Record Check with Vulnerable Sector Search will be required prior to starting employment or volunteer placement.

| I am applying for: | m applying for: Employment – please attach a resume to your application Volunteer Placement | | | | | | | | |
|----------------------|--|-----------------------------|--------------------------------------|--------------------------|--|--|--|--|--|
| | | | | | | | | | |
| Positon being appli | ed tor: | | | | | | | | |
| Date available to be | egin work or voluntee | er placement: | | | | | | | |
| PERSONAL DATA | | | | | | | | | |
| Last Name: | | Given Name | e: | | | | | | |
| Address: | | | Apt. # | | | | | | |
| City: | | Province: | Postal Code: | | | | | | |
| Home #: | Cell #: | Work #: | Email: | | | | | | |
| Are you legally able | to work in Canada? | YES NO Please circle one | Are you over 18 years of age? | YES NO Please circle one | | | | | |
| • | qualifications for empleter and other achiever | | omplete the following section relate | d to your academic | | | | | |
| EDUCATION | | | | | | | | | |
| Highest grade or lev | vel completed: | | Name of Program: | | | | | | |
| Type: High School | Community Colleg | e University Na | ame of Institution: | | | | | | |
| Name of license, ce | rtificate, diploma or | degree awarded: _ | | | | | | | |
| Please complete th | e following section s | tarting with the m | ost recent education and working b | ackwards. | | | | | |
| Name of Program: | | Le | ngth of Program: | | | | | | |
| Diploma or Degree | Awarded: | | | | | | | | |
| Major subject: | | | | | | | | | |
| Name of Program: | | | | | | | | | |
| Diploma or Degree | Awarded: | | | | | | | | |
| Major subject: | | | | | | | | | |
| Name of Program: | | Le | Length of Program: | | | | | | |
| Diploma or Degree | Awarded: | | | | | | | | |
| Major subject: | | | | | | | | | |



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| Other relevant training/education that pertains to the position applied for: | | | | | | |
|---|-----------------------------------|--|--|--|--|--|
| | | | | | | |
| EMPLOYMENT HISTORY | | | | | | |
| Please complete the follo | wing section starting with the mo | ost recent employment and working backwards. | | | | |
| Describe any of your work related skills, experience or training that pertains to the position being applied for: | | | | | | |
| | | | | | | |
| Organization: | | | | | | |
| Job Title: | | | | | | |
| Period of employment: | Started: | _ Ended: | | | | |
| Function/responsibilities: | | | | | | |
| Reason for leaving: | | | | | | |
| Organization: | | | | | | |
| Job Title: | | | | | | |
| Period of employment: | Started: | _ Ended: | | | | |
| Function/responsibilities: | | | | | | |
| Reason for leaving: | | | | | | |
| | | | | | | |
| | | | | | | |
| | | _ Ended: | | | | |
| Function/responsibilities: | | | | | | |
| Reason for leaving: | | | | | | |



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VOLUNTEER HISTORY

| Please complete the following section starting from your most recent volunteer placement and working backwards. | | | | | | | | |
|---|--|--------|--|--|--|--|--|--|
| Describe any of your work/volunte | Describe any of your work/volunteer related skills, experience or training that pertains to the position being applied for | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Organization: | | | | | | | | |
| | | | | | | | | |
| | | Ended: | | | | | | |
| Function/responsibilities: | | | | | | | | |
| Reason for leaving volunteer place | cement: | | | | | | | |
| Organization: | | | | | | | | |
| Volunteer Title: | | | | | | | | |
| Period of volunteer placement: | Started: | Ended: | | | | | | |
| Function/responsibilities: | | | | | | | | |
| Reason for leaving volunteer place | cement: | | | | | | | |
| Organization: | | | | | | | | |
| Volunteer Title: | | | | | | | | |
| Period of volunteer placement: | Started: | Ended: | | | | | | |
| Function/responsibilities: | | | | | | | | |
| Reason for leaving volunteer place | cement: | | | | | | | |



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REFERENCES

Please list **three** references below or alternatively you may add a list of references. **Two out of three references must be unrelated to the YMCA-YWCA of Winnipeg.**

| Name: | | | Name: | | |
|---|-------------------|---------------------|--|----------------------|---------------|
| Organization: | | | Organization: | | |
| Position: | | | Position: | | |
| | Home | Please | | Home | Please |
| Phone #1: | Work Cell | circle one | Phone #1: | Work Cell | circle one |
| | Home | Please | | Home | Please |
| Phone #2: | Work Cell | circle one | Phone #2: | Work Cell | circle one |
| | | | | | |
| Name: | | | Name: | | |
| Organization: | | | Organization: | | |
| Position: | | | Position: | | |
| | Home | Please | | Home | Please |
| Phone #1: | Work Cell | circle one | Phone #1: | Work Cell | circle one |
| | Home | Please | | Home | Please |
| Phone #2: | Work Cell | circle one | Phone #2: | Work Cell | circle one |
| Have you attached an additional reference | e sheet? | YES Please | NO circle one | | |
| DECLARATION and AUTHORIZATION | | | | | |
| statement may disqualify me from emplo misconduct against me and there is none | oyment e known | or causo to me t | nd complete to my knowledge; I understan e my dismissal. I have not had any accusati that could prevent me from doing the appli person listed as a reference in this or the a | ions of ied for v | work. |
| | | - | es as of the date of signature below and co | | |
| Signature of Applicant | | | Date | | |

PRIVACY STATEMENT

The Young Men's and Young Women's Christian Association of Winnipeg (the YMCA-YWCA) respects your privacy. We protect your personal information and adhere to all legislative requirements with respect to protecting privacy. We do not rent, sell or trade our mailing lists. The information you provide will be used to deliver services and to keep you informed and up to date on the activities of the YMCA-YWCA, including programs, services, special events, funding needs, opportunities to volunteer or to give, open houses and more through periodic contacts. If at any time you wish to be removed from any of these contacts simply contact us by phone at (204) 832-7002 or via e-mail at privacy@ymcaywca.mb.ca, and we will gladly accommodate your request."