



Y DAY CAMP™

Greater Newburgh YMCA – Camp Robbins

Seasonal: 131 North Drive
Walden, NY 12586
Tel: 845-778-7141

Mailing Address: 377 Broadway
Newburgh, NY 12550
Tel: 845-562-1088
Fax: 562-9172

Email: info@NewburghYMCA.org

Website: www.NewburghYMCA.org

Summer 2010

Dear Applicant:

Thank you for your interest in applying to work with the Greater Newburgh YMCA's Camp Robbins summer program. As you know, working with children can be a very rewarding experience, it can also challenge you to require great patience, creativity, and an ongoing energy to actively interact with and supervise children.

At YMCA Camp Robbins we teach our campers the YMCA values of Honesty, Respect, Caring and Responsibility. It is an expectation that staff hold true to these values and act as role models for our campers, our community and fellow staff. We look for staff who are able to put their campers' needs first, always have high energy, and are enthusiastic about the outdoors! We pride ourselves in selecting staff based on prior work and volunteer experience, certifications, educational background and recommendations. We also strive to find staff whose enthusiasm and appreciation for the outdoors and youth programming can contribute to our camp community.

It is our belief that staff play a vital role in the success of our summer camp and its happy and healthy campers. We are looking for those very special individuals who enjoy and have the skills to work with children in the camp setting. Applicants who qualify for hire will be required to complete the scheduled orientation and training sessions prior to starting employment and are expected to work the entire 39-day camp season. Staff training includes: an orientation to YMCA Day Camps outlining the standards, procedures, philosophy and mission; reviewing camp policies and regulations; training for specific job responsibilities; learning about child development, leading games and songs; First Aid/CPR and many more skills to effectively work with children.

Please note: Training sessions will be held throughout the month of June, mostly weekends and some afternoon/evening sessions. These training sessions are a vital part of all YMCA staff development and much of the criteria must be completed in order to work with our campers. Although not all dates are mandatory, those that are must be attended. Mandatory dates will be determined prior to contracts being sent out. The camp season begins June 28th & ends Aug. 20th with additional weeks available for employment up to September 3rd.

HIRING SCHEDULE -Please keep the following dates in mind.

February 15th – Applications available for all positions – interview process starts

March 5th – All Returning Staff & Administrative Position Applications Due

March 15th – Applications open for general hire

March 30th (week of) – Administrative & “First Wave Hiring” of Applications sent in by deadline

April 20th and beyond – Hiring for any remaining positions

Please make every effort to complete the enclosed application to the best of your abilities and note any experience or training that would be relevant to hiring. Upon receiving a completed application and **three references**, I will call to schedule an interview with you. Applications can be dropped off or mailed to our offices. Please note that positions fill-up quickly and you are encouraged to apply early.

MAIL **PRIOR TO MARCH 1ST** mail to: Greater Newburgh YMCA-Camp Robbins, 10 Little Britain Rd. #204, Newburgh, NY 12550

MAIL **AFTER MARCH 1ST** mail to our **NEW FACILITY LOCATION: Greater Newburgh YMCA-Camp Robbins**
377 Broadway
Newburgh, NY 12550.

Sincerely,

Jennifer Rawlison ☺
Senior Program/Camp Director



Greater Newburgh YMCA Staff Application

377 Broadway
Newburgh, NY 12550
845-562-1088
845-562-9172 fax
www.NewburghYMCA.org



Notice to Applicants and Employees of the Greater Newburgh YMCA: The Greater Newburgh YMCA maintains “zero-tolerance” for abuse of any kind. Background checks are performed on all employees and screening for alcohol and illegal drugs may be required prior to and during employment.

PLEASE PRINT Date of Application _____ / _____ / _____

Equal access to programs, services, and employment is available to all persons. Those applicants requiring reasonable accommodations for the application and/or interview process should notify our offices and requesting interviewer.

Y-Staff Contacted Regarding Position If Any: _____ Position(s) applied for _____

Name _____ Social Security # _____

Address _____ City _____ State _____ Zip _____

Phone _____ Cell: _____ Email: _____

If away at college: School Address: _____

Type of employment desired Full-time Part-time Temporary Seasonal Educational Co-op/Internship Volunteer

Days of Availability: _____ Hours of Availability _____ Date Available to Start Work _____

Have you been previously employed by the YMCA? No Yes: YMCA Name: _____ Position Held _____

Are you permitted to work in the US? No Yes Military Branch: No Yes: Branch _____

Have you ever been convicted of a crime (other than traffic violations)? No Yes (a conviction record will not necessarily be cause for disqualification)
If Yes, please state offense: _____ date: _____ and location: _____

Check the talents you would like to share with the YMCA: administrative clerical fund raising marketing cleaning
 building & grounds maintenance camp facility maintenance electrical work plumbing painting/staining
 aquatics fitness instructor summer camp programs child care teen programs weekend programs
 weekends at camp teach a class to adults (what subject?): _____ other: _____

If you indicated that you would like to work with children in child care, camp or teen programs, please check the areas in which you have skills you could share:
 arts & crafts aquatics tutoring community service projects computer skills cooking/nutrition health care rock climbing
 sports & games class instruction (which classes?) _____ other _____

Please describe any experiences, training, skills or interests that may qualify you as being able to perform job-related functions in the position(s) you are applying for: _____

List updated certifications, licenses and trainings (Please enclose a copy):

Type	Expires	Type	Expires
Drivers License # _____	_____	CPR(Type) _____	_____
State ID _____	_____	Lifeguard _____	_____
First Aid _____	_____	WSI _____	_____
RTE _____	_____	Canoeing _____	_____
EMT _____	_____	Basic Water Rescue _____	_____
LPN / RN _____	_____	Small Craft Safety _____	_____
Project Adventure _____	_____	Other _____	_____

EDUCATION

Name of Schools (High School, College, Graduate School)	Major area of study	Dates	Highest Grade Completed	Degree or Credits

EMPLOYMENT HISTORY - List most recent experiences first-enclose resume or use additional paper as needed

FROM	TO	EMPLOYER NAME & ADDRESS	TELEPHONE ()
JOB TITLE			May We Contact?
IMMEDIATE SUPERVISOR	SUMMARIZE THE NATURE OF WORK PERFORMED AND RESPONSIBILITIES		
REASON FOR LEAVING	HOURLY RATE/SALARY START \$ _____ PER _____ FINAL \$ _____ PER _____		
FROM	TO	EMPLOYER NAME & ADDRESS	TELEPHONE ()
JOB TITLE			May We Contact?
IMMEDIATE SUPERVISOR	SUMMARIZE THE NATURE OF WORK PERFORMED AND RESPONSIBILITIES		
REASON FOR LEAVING	HOURLY RATE/SALARY START \$ _____ PER _____ FINAL \$ _____ PER _____		
FROM	TO	EMPLOYER NAME & ADDRESS	TELEPHONE ()
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REASON FOR LEAVING	HOURLY RATE/SALARY START \$ _____ PER _____ FINAL \$ _____ PER _____		

List 2 non-relatives and non-peers and 1 family member who can attest to your character, work ethic and ability to do the type of work you are applying to perform

NAME & EMAIL	ADDRESS	PHONES	POSITION/TITLE

I certify that the statements made in this application (and any accompanying resume) are true and correct to the best of my knowledge. I understand that any misinformation, falsification or failure to disclose pertinent information will result in the termination of my services. I authorize all present or prior employers, educational institutions and the individuals listed by me on this application to release to the YMCA any information relevant to this application, including information about my employment record, and hereby release them from liability and responsibility for doing so. To protect the people in our care, as well as the staff members and volunteers who serve them, we follow strict policies on abuse prevention. We do everything possible to screen out potential offenders and to prevent abuse from occurring to people in our care. I understand that the YMCA reserves the right to conduct a criminal background check and that by signing this application I consent to blood and alcohol testing and that failure to submit to such testing immediately shall be grounds for dismissal. I understand that any offer of employment is contingent upon my supplying documentation to substantiate my identity and employment eligibility sufficient to complete the I-9 Form required by the Federal Immigration and Control Reform Act of 1986.

The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant _____ Date: / / .



PLEASE COMPLETE & RETURN TO:

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Newburgh, NY 12550
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845-562-9172 fax
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APPLICANT CRIMINAL HISTORY STATEMENT

In accordance with Section 390-b(1)(a) of the Social Services Law, I certify that to the best of my knowledge and belief **I HAVE** **I HAVE NOT** been convicted of a crime in New York State or any jurisdiction. If I have been convicted of a crime, I will provide true and accurate information concerning the crime for which I was convicted, the date of conviction and any other relevant information in the space provided below. In addition, I will provide written justification on the back of this sheet, explaining why I should be allowed to have contact with children regardless of my conviction. ***I am aware that this will be my only opportunity for this explanation to be considered in the decision to approve or deny my employment.***

Complete the information below and submit with record of conviction or certification of court arraignment.

TYPE OF CRIME	PENAL CODE SECTION	DATE OF CONVICTION	COUNTY OR COURT OF ARRAIGNMENT
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____

To the best of my knowledge the information provided above is true and accurate. I understand that my failure to truthfully and accurately state whether I have been convicted of a crime and/or to provide truthful and accurate information concerning the convictions may constitute ground for dismissal or denial of employment, or suspension, limitation or revocation of the registration to provide child care.

Applicant Name: _____ Signature: _____ Date: ____/____/____



PLEASE SEND COMPLETED REFERENCES TO:

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377 Broadway
Newburgh, NY 12550
845-562-1088
845-562-9172 fax
www.NewburghYMCA.org



REQUEST FOR REFERENCE

The person named below has given your name as a reference in applying for a position at the Greater Newburgh YMCA. It is important that Y staff are well rounded in spirit, mind and body and are caring, honest, respectful and responsible. We appreciate your evaluation of the applicant. Our consideration for employment of the applicant depends on your response. Your prompt attention to this matter will be appreciated. Thank you very much for your time and consideration.

APPLICANTS MUST COMPLETE THIS BOX BEFORE DISTRIBUTING

Applicant's name: _____ Position applying for: _____

I request that (Name of reference) _____ complete this form as a reference for a position at the Greater Newburgh YMCA.

_____ I have retained my right of access to this reference

_____ I have waived my right of access to this reference

Date _____ Applicant's Signature _____

- How long have you known the applicant? _____ In what capacity have you known the applicant? _____

- If applicant worked for you, would you rehire? Yes _____ No _____ Explain: _____

- The YMCA is a drug, alcohol and smoke-free facility. Would the applicant fit into this environment? _____

- To your knowledge, what is the ability of the applicant to get along with:
Children _____
Peers: _____
Adults of a different generation: _____
- What strengths does the applicant have that would benefit the position they are applying for? _____

- Please list any areas that the applicant could improve upon _____

- It is the priority of the YMCA to keep the children in our programs safe. Please explain any reasons why you might think that this employee would be better suited *NOT* to work with children _____

TURN OVER PLEASE

