

Office Only: Rec'd On: Date E-mail sent for interview Date/Time of interview: zoom / in person	Office Only: Rec'd On:	Date E-mail sent for interview	Date/Time of interview:	zoom / in person
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SUMMER CAMP COUNSELOR APPLICATION (The YMCA of Martha's Vineyard is an Equal Opportunity Employer)

NAME		D	ATE	
CELL PHONE #	P	referred T-Shirt Size:		
DATE OF BIRTH (minimum age for cam	np staff is 16):			
PHYSICAL ADDRESS				
		(City)	(State)	(Zip)
MAILING ADDRESS				
		(City)	(State)	(Zip)
E-MAIL ADDRESS (print clearly)				
NOTE: An e-mail message will be sent	t to notify you	u that we have rece	eived your appli	cation. Please chec
email regularly as this is our main for	m of commu	nication during the	hiring phase.	
Are you available to work from June 17st	– August 16 th ?			
It is highly preferred that applicants are a note that you may not be eligible for hire is stay until this date, please list dates availa	if you are not	able to commit to the	e entire summer.	
Can you, after employment, submit verificat	ion of your leg	al right to work in the	United States? Y	TES NO
If hired, do you have secured housing on Ma	artha's Vineyar	d for your dates of en	nployment? YES	NO
If hired, would you be able to do a face-to-fa	ace interview o	r a Zoom interview?	Face Zoom	
If hired, do you have a reliable means of tran	nsportation to g	get to work? YES N	0	
Have you ever applied for a job at a YMCA	? YES NO	If yes, when, and v	which one?	
Have you ever been employed by a YMCA?	YES NO	If yes, when, and v	which one?	
How were you referred to the YMCA of Ma	rtha's Vineyard	d?		
☐ MV Times ☐ Gazette ☐ Employee R	eferral 🗆 Wa	alk-In Other (ple	ase specify)	
If Referral Name of Person:				

EDUCATION AND TRAINING

SCHOOL NAME & LOCATION	Years Attended From To	Graduate? (Yes/No)	What Degree	Major Subject/ Total Hours (if applicable)
Elementary				
High School				
College/University				
College/University				
Highest Degree Earned				Overall College
(Circle one number only): 1. High School 2. Asso	ociate 3. Bachelor 4. Master	5. Doctorate		Scholastic Average
(F	CERTIFIC irst Aid, CPR, Babysittin		ard Cert.)	
Type of Certification:				
Date Received:		Expiration Date	:	
Type of Certification:				
Date Received:		Expiration Date	:	
Type of Certification:				
Type of Cerunication.				
Date Received: **If hired for a camp counselor position		Expiration Date		he American Red Cro
**If hired for a camp counselor positic Lifeguard Certification Course offered YES NO WHICH AGE GROUP WOULD YOU 5 & 6-year-olds Children Entering Grades Children Entering Grades Children Entering Grades Children Entering Grades	1 at the YMCA of MV? OU PREFER TO WOR 5 1-3 5 4-6 5 7 & 8	and able to pa	articipate in t	
***Please note our camp day is 8:368:15am-4:10pm.	at the YMCA of MV? OU PREFER TO WOR 5 1-3 5 4-6 5 7 & 8 am-4:00pm. If hired, y	and able to pa	articipate in t	Monday through Fr
***Please note our camp day is 8:368:15am-4:10pm.	at the YMCA of MV? OU PREFER TO WOR 5 1-3 5 4-6 5 7 & 8 am-4:00pm. If hired, y	and able to pa	articipate in t	Monday through Fr
***Please note no vacation time off	at the YMCA of MV? OU PREFER TO WOR S 1-3 S 4-6 S 7 & 8 Dam-4:00pm. If hired, y is guaranteed from Jun	and able to pa K WITH? ou must have	articipate in t	Monday through Fr
***Please note no vacation time off CAMP WORK EXPERIENCE (Beg	at the YMCA of MV? OU PREFER TO WOR 1-3 54-6 57 & 8 2am-4:00pm. If hired, y is guaranteed from Jun gin with your most rece	and able to pa K WITH? ou must have e 17th -Augus	articipate in the state of the	<mark>Monday through Fr</mark> l <mark>ay – Friday.</mark>
**If hired for a camp counselor positic Lifeguard Certification Course offered YES NO WHICH AGE GROUP WOULD YOUR SECOND COURSE OF SECOND COUR	at the YMCA of MV? OU PREFER TO WOR S 1-3 S 4-6 S 7 & 8 Cam-4:00pm. If hired, y is guaranteed from Jun gin with your most rece	and able to pa K WITH? ou must have e 17th -Augus nt job):	availability	<mark>Monday through Fr</mark> lay – Friday.
***Please note no vacation time off CAMP WORK EXPERIENCE (Beg **If hired for a camp counselor position. ***Please note our camp day is 8:36 ***Please note no vacation time off CAMP WORK EXPERIENCE (Beg Camp Name and Address	at the YMCA of MV? OU PREFER TO WOR 1-3 5 4-6 5 7 & 8 cam-4:00pm. If hired, y is guaranteed from Jun gin with your most rece	and able to pa K WITH? ou must have e 17th -Augus nt job):	availability	<mark>Monday through Fr</mark> l <mark>ay – Friday.</mark>

Reason for Leaving_

(attach additional page if necessary)

GENERAL WORK EX	PERIENCE (Begin with your	most recent job):	
Employer Name and Addi	ress		
Employer Phone Number_			
Job Title and Salary			
Employment Dates			
Reason for Leaving			
Employer Name and Addi	ress		
Employer Phone Number			
Job Title and Salary			
Employment Dates			
Reason for Leaving			
Have you ever been co	onvicted of a crime?	If so, please ex	xplain
			es you can organize and teach; put those you would be interested in
Sports Soccer Baseball Basketball Archery Fishing Kickball Various Games Other:	Camp Skills Outdoor Cooking Fire Building Nature Facts Ropes Course Knot Tying/Lashing Pocket Knife Safety Other:	ArtsDanceDramaSingingMusicOther:	Crafts Nature Crafts Tie Dye Jewelry Painting Clay Beads Other:
	ENCE (Related to school, chur		

Considering the limited pay	and long hours, explain why you are	applying to work at our camp?
One of our camp philosophic implement this philosophy in		s, Make A Difference". How would you
	REFERENCE DAT	ΓΑ
	MAY CONTACT – MUST BE PR PLOYMENT (two professional if	ROVIDED 3 TO BE CONSIDERED FOR available, one familial)
NAME	EMPLOYER	EMAIL ADDRESS

PRE-EMPLOYMENT CERTIFICATION Must be initialed to be considered for employment

The YMCA mission embraces "building a healthy mind, spirit and body for all". Applying for a position at our camp implies that you are committed to being a positive influence and role model. Your signature below indicates willingness to deliver the YMCA mission and our camp philosophy to our campers and your fellow staff.

I certify that all the information provided on this application is true, complete and correct.

	I understand that this application is only valid for the position applied for at present and that the YMCA is not obligated to retain or consider this application for future openings.
 Initial	Tetain of consider this application for future openings.
iiittai	I authorize investigation of all statements contained in this application. I understand that falsification, misrepresentation of omission of facts called for will result in immediate termination from employment or removal of my application from consideration. I authorize the YMCA to secure information about my experience with former employers, education institutions and agencies, and for those parties to provide information concerning my experience releasing all parties from any liability arising there from. I understand that any employment offer is contingent upon the results of criminal history and sex offender background checks.
Initial	
	If employed by the YMCA I will abide by Association policies and rules. I understand that I will be required to possess a current and valid driver's license if my position requires me to drive in the course of my work.
Initial	current and vand driver a needse it my position requires me to drive in the course of my work.
	Should an employment offer be made, I understand that I will be required to furnish a verifiable Social Security Number as
Initial	part of my background checks.
My si application of potential em agreements, understand	gnature below also certifies that I agree to be bound by the terms and conditions stated in this application. This contains all the understandings and agreements between the YMCA and me concerning the nature of my aployment, if any, by the YMCA and supersedes all prior and/or contemporaneous practices, oral or written understandings, statements, representations and promises, express or implied, between the YMCA and me. I and agree that, except as noted above, no person who is either an agent or employee of the YMCA may modify, or contradict, whether orally or in writing, the terms and conditions set forth herein.
Applicant Sign	nature Date of Application
Ple	ease email application to Jessey Powell, Camp Director, at jpowell@ymcamv.org

Camp Terra Mar

The best summer a kid could have!

All employees must complete this form.

The YMCA of Martha's Vineyard, Inc. CORI REQUEST FORM

The YMCA of Martha's Vineyard, Inc., is registered under the provisions of M.G.L c. 6, 172 to receive a CORI for the purpose of screening current and otherwise qualified prospective employees and volunteers. The YMCA of Martha's Vineyard has authorized Kelly Neadow to submit CORI checks to the Massachusetts Department of Criminal Justice Information Services (DCJIS) and to Hire Right. The YMCA of Martha's Vineyard, like other YMCAs, conducts criminal record checks every two years for all of its current employees/volunteers. I understand that a criminal record check will be conducted for conviction and pending criminal case information. The information below is correct to the best of my knowledge.

Employee Signature	Date		
Employee Information (Please Pr	int):		
ast Name	First Name	Middle Name	
Employee Maiden Name or Alias (if appl	licable) Mother's		
Full Maiden Name			
ather's Full Name			
Date of BirthPlace of	Birth		
Social Security Number			
ID Theft Index PIN (if applicable)*			
Current Physical Address:			
Former Physical Address:			
Sex:Height:ft	in. Weight:	Eye Color:	Race:
State Driver's License Number or Pass	sport Number:		
The above information was verified by	y reviewing the following form of gover	nment issued photographic identific	cation (Driver's
	ear old, etc.):		

*The CHSB Identify Theft Index PIN Number is to be completed by those applicants that have been issued an Identity Theft Index PIN Number by the CHSB. Certified agencies are required to provide all applicants the opportunity to include this information to ensure the accuracy of the CORI request process. All CORI request forms that include this field are required to be submitted to the CHSB via mail or by fax to 617-660-4614 For HR Use Only

Signature of Authorized YMCA Employee Date Received Date Submitted Batch ID Date Report Received

Please turn over/see second page for additional signature and date needed, thank you!

The YMCA of Martha's Vineyard, Inc.

CRIMINAL OFFENDER RECORD INFORMATION ACKNOWEGMENT FORM

The YMCA of Martha's Vineyard, Inc., is registered under the provisions of M.G.L c. 6, 172 to receive a CORI for the purpose of screening current and otherwise qualified prospective employees and volunteers. The YMCA of Martha's Vineyard has authorized Kelly Neadow to submit CORI checks to the Massachusetts Department of Criminal Justice Information Services (DCJIS) and to HireRight. The YMCA of Martha's Vineyard, like other YMCAs, conducts criminal record checks every two years for all of its current employees/volunteers.

FOR EMPLOYMENT, VOLUNTEER and LICENSING PURPOSES ONLY:

Kelly Neadow, on behalf of the YMCA of Martha's Vineyard may conduct subsequent CORI checks within one year of the date this form was signed by me provided, however, that the YMCA of Martha's Vineyard must first provide me with written notice of this check.

FOR PROSPECTIVE EMPLOYEES WITH PRIOR OUT OF STATE ADDRESSES:

The YMCA of Martha's Vineyard has contracted with HireRight, a consumer reporting agency, to provide the consumer report. HireRight may be contacted by email at customerservice@hireright.com by telephone at 1-866-521-6995. The types of information that may be obtained include but are not limited to social security number verification, sex offender registry checks, criminal records check, inmate record searches and court records checks. The consumer reports will not include credit record checks or motor vehicle checks. The nature and scope of the consumer reports are described above. Nonetheless, you are entitled to request a complete and accurate disclosure of the nature and scope of such reports by submitting a written request to HireRight at the email address listed above.

APPLICANTS ACKNOWLEDGEMENT AND AUTHORIZATION:

As a prospective or current employee or volunteer, I understand that a CORI check will be submitted for my personal information to the DCJIS and to HireRight. I hereby acknowledge and provide permission to the YMCA of Martha's Vineyard to submit a CORI check to the DCJIS and HireRight. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing, Kelly Neadow, Human Resource Director of the YMCA of Martha's Vineyard, written notice of my intent to withdraw consent to a CORI check. I also understand that this form is a CORI acknowledgement form and I am entitled to additional consumer reporting forms under the Fair Credit Reporting Act. The types of information that may be obtained: the nature or disposition of acriminal charge, an arrest, a pretrial proceeding, other judicial proceedings, sentencing, incarceration, rehabilitation and release dating from the subject's 17th birthday. It does not include juvenile criminal history, except for charges on which a juvenile was adjudicated as an adult. The nature and scope of the consumer reports are described above. Nonetheless, you are entitled to request a complete and accurated sclosure of the nature and scope of such reports by submitting a written request to Kelly Neadow, Human Resource Administrator The YMCA of Martha's Vineyard, 111R Edgartown Vineyard Haven Road, Vineyard Haven, MA 02568. (508) 696-7171, extension 115.

A free copy of your HireRight background check report can be obtained by calling 1-866-521-6995.

DISPUTE THE RESULTS OF A BACKGROUND CHECK REPORT:

If you already have a copy of your employment background check report and wish to dispute specific information, please refer to the contact information on your report or associated letter. If you cannot locate that information, please contact HireRight at 1-866-521- 6995, or by fax at 1-877-797-3441 or by e-mail at customerservice@hireright.com Or you may write them at HireRight 100 CenterviewDrive, Nashville, TN. 37214.

Signature Date