

PRE-EMPLOYMENT CERTIFICATION

I understand that this application is only valid for the position applied for at present and that the Greene County YMCA is not obligated to retain or consider this application for future openings.

Initial

I authorize investigation of all statements contained in this application. I understand that falsification, misrepresentation or omission of facts may result in removal of my application from consideration or immediate termination from employment. I authorize the Greene County 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.

Initial

If employed by the Greene County YMCA I will abide by Greene County YMCA policies and rules.

Initial

I understand that I may be required to submit to a drug/alcohol test prior to my employment or at any time during my employment as a condition of employment and as a condition of continued employment. I understand and agree that my refusal to submit to such a test upon request will result in my not being hired or, if already employed, will result in my immediate termination.

Initial

I hereby grant consent for the Greene County YMCA to perform a complete background investigation as terms of my employment. I understand this investigation may include but is not limited to my driving record, criminal record and researching my references. Further, I understand that some negative information may eliminate my eligibility for employment with the Greene County YMCA and shall not be considered discrimination. I understand this background check is a condition of employment under Greene County YMCA policies and procedures.

Initial

If I am employed by the Greene County YMCA I understand my employment can be terminated, with or without cause and with or without notice, at any time at the option of the Greene County YMCA or myself. I understand that, other than the Executive Director/CEO of the Greene County YMCA, no manager, supervisor or representative of the Greene County YMCA has authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing. Only the Executive Director/CEO of the Greene County YMCA has the authority to make any agreement contrary to the foregoing and then only in writing. I further expressly agree that, with respect to the at-will employment relationship, this constitutes the full, complete and final expression of the parties' intent concerning the nature of any employment relationship between myself and the Greene County YMCA.

Initial

My signature below certifies that I have read and understand the foregoing and to the best of my knowledge and belief, the information on this form is true and correct.

My signature below also certifies that I agree to be bound by the terms and conditions stated in this application. This application contains all the understandings and agreements between me and the Greene County YMCA concerning the nature of my employment, if any, by the Greene County YMCA and supersedes all prior and/or contemporaneous practices, oral, or written agreements, understandings, statements, representations and promises, express or implied, between me and the Greene County YMCA. I understand and agree that, except as noted above, no person who is either an agent or employee of the Greene County YMCA may modify, delete, vary or contradict, whether orally or in writing, the terms and conditions set forth herein.

Applicant Signature _____

Date of Application _____