



YMCA Childcare Employment Application

(we are an equal opportunity employer)

Date of Application _____

Name _____ Email _____

Address _____ Phone _____

Are you prevented from being lawfully employed in this country because of VISA or immigration status? _____ Are you 18 years or older? _____

Current Certifications	Expiration Date
CPR/First Aid	
Daily Health Observation	
Medication Administration	
Child Development Accreditation	
Lifeguard Certification	

Age Group Preferred	Position Applying For
Preschool (ages 3-5)	Lead (must be qualified)
Kindergarten-1 st grade	Aide
2 nd -3 rd grade	4 th -5 th grade

Date available _____

Are you presently employed? _____ Where? _____

May we contact your present employer? _____

How did you hear about this job? _____

Days/Hours Available:

Monday	Tuesday	Wednesday	Thursday	Friday

Please list all previous experience with children (paid, education or volunteer). Use a separate sheet of paper if necessary.

Employer _____	Address _____
Phone Number _____	Supervisor _____
Dates of Employment _____ to _____	
Reason for leaving _____	
List of duties _____	

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Phone Number _____	Supervisor _____
Dates of Employment _____ to _____	
Reason for leaving _____	
List of duties _____	

References: Please provide 3 references that we can contact (2 professional such as a previous manager, coach, teacher or pastor and 1 personal such as a family member).

_____	_____	_____
Name	Phone #	Relationship to applicant

_____	_____	_____
Name	Phone #	Relationship to applicant

_____	_____	_____
Name	Phone #	Relationship to applicant

Education

High School _____	Graduate _____
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College _____	Graduate _____
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Please list any degrees, certifications, or special courses of study you may have: _____

Please list any special training skills, activities, military experience, volunteer experience or professional memberships you have (ie Rotary, Kiwanis, etc.)

Please answer the following pre-interview screening to the best of your ability.

1. Are you familiar with State Licensing Guidelines? If yes, please explain.

2. What is your philosophy on conflict management when working with a child who is showing inappropriate behaviors?

3. How did you hear about our childcare program? Why do you want to work for us?

4. Give an example of how you can play and engage with children?

5. During open gym or outdoor play, please give an example of an activity you can do with children?

Driving Disclosure

Before driving any vehicle to transport children, I realize that I am required to disclose any moving traffic violations that occurred five years prior to or during employment or assignment as a driver.

Signature

Date

**Check here if unable to drive

In case of emergency, notify _____ Relationship _____

Address _____ Phone # _____

"I certify that all information submitted on this application is true and complete. I understand that if any false information, omissions, or misinterpretations are discovered my application may be rejected and if I am employed, my employment may be terminated. In considerations of my employment, I agree to conform to all the YMCA's rules and regulations. I agree that my employment can be terminated with or without cause, with or without notice at any time, at either my option or the YMCA's option. I understand and agree that the terms and conditions of my employment may be changed with or without cause or notice at any time by the YMCA.

Signature

Date

SWORN STATEMENT OR AFFIRMATION FOR CHILD DAY PROGRAMS
Please Print

Last Name	First	Middle	Maiden	Social Security Number
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Current Mailing Address	Street, P.O. Box #, Apt. #	City	State	Zip Code
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Name of Licensed/Registered Approved Facility/Provider	Street, P.O. Box #, Apt. #	City	State	Zip Code
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Have you lived outside of Virginia in the past five years? ☐ Yes ☐ No

If yes, what state(s) have you lived in: _____

Please respond to all four (4) questions below:

1. Have you ever been convicted of or are you the subject of pending charges of any crime within the Commonwealth of Virginia? ☐ Yes (convicted in Virginia) ☐ Yes (pending in Virginia) ☐ No

If yes to convicted or pending, specify crime(s): _____

2. Have you ever been convicted of or are you the subject of pending charges of any crime outside the Commonwealth of Virginia? ☐ Yes (convicted outside Virginia) ☐ Yes (pending outside Virginia) ☐ No

If yes to convicted or pending, specify crime(s) and state, or other location: _____

3. Have you ever been the subject of a founded complaint of child abuse or neglect within the Commonwealth of Virginia? ☐ Yes (in Virginia) ☐ No (in Virginia)

4. Have you ever been the subject of a founded complaint of child abuse or neglect outside the Commonwealth of Virginia? ☐ Yes (outside Virginia) ☐ No (outside Virginia)

If yes, specify state, or other location: _____

I hereby affirm that the information provided on this form is true and complete. I understand that the information is subject to verification and that making a materially false statement or affirmation is a Class 1 misdemeanor.

Signature

Date

Explanation of Sworn Statement or Affirmation

Requirement: Sections 22.1-289.015, 22.1-289.035, 22.1-289.036, 22.1-289.039, 22.1-289.040 and 19.2-389.3 of the *Code of Virginia* (Code) require individuals to provide a sworn statement or affirmation to a licensing, approving or hiring authority, facility, or agency prior to licensure, registration, approval, employment, or provision of volunteer services. A sworn disclosure or affirmation is a statement completed by a person attesting to whether he has ever been: (i) convicted of or is the subject of pending charges for any offense within or outside of the Commonwealth, or (ii) the subject of a founded complaint of child abuse or neglect within or outside the Commonwealth.

A sworn statement does not need to disclose any deferred or dismissed misdemeanor violation against a person that relates to any arrest, criminal charge, or conviction relating to the sale, gift, distribution or possession with intent to sell, give or distribute marijuana. **The Department of Education or an employer seeking to be [or, who is] licensed, registered, approved, or otherwise regulated by the Department shall NOT require such disclosure (§ 19.2-389.3 of the Code of Virginia).**

The statement or affirmation must be made available to the Department of Education's representative.

Who must comply: These individuals must provide sworn statements or affirmations:

- Applicant upon application for licensure or registration as a child day program or family day system, and any subsequent person designated as applicant, licensee, or registrant;
- Agent at the time of application who is or will be involved in the day-to-day operation of the child day program or family day system, or who is or will be alone with, in control of, or supervising one or more of the children and any subsequent person designated as agent who will be involved in the day-to-day operation or will be alone with, in control of, or supervising one or more of the children;
- Any other adult living in the home of an applicant for licensure or registration or approval as a family day home, or any existing employee or volunteer, and subsequent employee or volunteer or other adult living in the home;
- Operator of family day home requesting approval by family day system;
- Person who signs the statement of intent to operate a religiously exempt child day center;
- Any person who will be expected to be alone with one or more children enrolled in a religious exempt child day center; and
- Any employee or volunteer of a licensed, registered, or approved facility who is involved in the day-to-day operations or who is alone with, in control of, or supervising one or more children.

Note: Any other child day center or family day home that has not otherwise met these requirements, and applies to enter into a contract with a local department to provide child care services to clients of a local department, must also submit a sworn statement or affirmation.

Exception: A parent-volunteer is not required to provide a sworn statement or affirmation. A parent-volunteer is a person supervising, without pay, a group of children that includes the parent-volunteer's own child in a program that operates no more than four hours per day, provided that the parent-volunteer works under the direct supervision of a person who has received satisfactory background checks as provided for in the Code.

Any person making a materially false statement regarding any such offense is guilty of a Class 1 misdemeanor.

Further dissemination of the sworn statement information is prohibited other than to the Superintendent's representative or a federal or state authority or court in order to comply with an express requirement in the law for that dissemination.

Consequence: If a person required to submit a sworn statement or affirmation (i) fails to submit a sworn statement or affirmation, or (ii) has been convicted of a barrier crime (specified below), or (iii) has been convicted of any other felony in the last five years, or (iv) has been the subject of a founded complaint of child abuse or neglect, and the facility refuses to separate that person from employment or service:

- Licensure, registration or approval of a child day program is prohibited;
- Licensure, registration or approval will be revoked and renewal of a license or registration or religiously exempt status will be denied;
- Religiously exempt status will be revoked; and
- The child day program will not be permitted to receive federal, state or local child care funds.

Exception: A person who wants to operate or to volunteer or work at a facility covered by this regulation, but who is disqualified because of a criminal conviction, or a criminal conviction in the background check of any other adult living in a family day home governed by this regulation may apply for a waiver if any other adult living in the home of a state regulated family day home applicant or provider has been convicted of not more than one misdemeanor offense of assault and battery or assault and battery against a family or household member. This other adult may not be an assistant or substitute provider.