

APPLICATION FOR EMPLOYMENT The Altamont Program, Inc. / 820 River Street, Inc.

We are an Equal Opportunity Employer (EOE).

We consider applicants for all positions without regard to race, color, religion, sex, genetic predisposition, national origin, age, marital or veteran status, sexual orientation, citizenship status, disability, or any other legally protected status.

Address:		
City:	State:	Zip Code:
Email Address:		
lome Phone:		
Cell Phone:		
lave you previously work	ced for The Altamont Pro	gram, Inc. or 820 River St
nc.?	ked for The Altamont Pro	ogram, Inc. or 820 River St
nc.?		ogram, Inc. or 820 River St
nc.?		ogram, Inc. or 820 River St
nc.? Yes No If yes, provide dates and lo	ocation(s):	ogram, Inc. or 820 River St
nc.? Yes No If yes, provide dates and lo Are you authorized to wor Yes No	ocation(s):	ogram, Inc. or 820 River St
nc.? Yes No If yes, provide dates and lo	ocation(s):	ogram, Inc. or 820 River St



s Available to Work: (check all that apply) Monday							
Hours Available to Work: Can you work overtime if needed? Yes No Do you have reliable transportation? Yes No							
					Are you 18 years of age or older?		
Ation & Training High School: Name: Dates Attended:		Degree:					
High School: Name: Dates Attended: College/University:							
High School: Name: Dates Attended: College/University:	Location:	Degree: Degree:					
High School: Name: Dates Attended: College/University: Name: Dates Attended:	Location:						
High School: Name: Dates Attended: College/University: Name: Dates Attended: Dates Attended:	Location: Training:						
High School: Name: Dates Attended: College/University: Name: Dates Attended: Dates Attended:	Location: Training: Location:	Degree:					
High School: Name: Dates Attended: College/University: Name: Dates Attended: Dates Attended: Vocational/Technical Name:	Location: Training: Location:	Degree:					



Employment History

Start with your most recent job. Include any relevant experience, including internships or volunteer work.

1.	Employer:		
	Position/Title:		
	Dates Employed: From:		
	Reason for Leaving:		
2.	Employer:		
	Position/Title:		
	Dates Employed: From:	To:	
	Reason for Leaving:		
	Supervisor's Name:		
	Contact Info:		
Refe	rences		
Please	e provide 2 work-related referenc	ces and 2 personal references.	
•	Work References:		
	4. Name:	Title:	
	Company:	Phone/Email:	
	5. Name:	Title:	
	Company:	Phone/Email:	
•	Personal References:		
	3. Name:	Relationship:	
	Phone/Email:		



	4. Name: Relationship:	
	Phone/Email:	
Crimir	l History	
	onviction does not automatically disqualify you from employment. Your application ered based on the nature of the offense and its relevance to the position applied fo	
•	you have any pending arrests/charges against you at this time? Yes No	
•	ve you ever been convicted of a felony or misdemeanor? Yes No	
Atta or c	, list all misdemeanors and felonies, including date(s), offense(s) and disposition(s an additional sheet, if necessary. Do not list arrests that were dismissed against y ninal convictions under a youth offender status or convictions that have been seale New York's Criminal Procedural Law.	ou

Applicant Statement & Signature

By signing this application, I affirm that the information provided is true and complete to the best of my knowledge. I understand that any misrepresentation or omission may result in disqualification from consideration for employment or termination if already employed.

I authorize The Altamont Program, Inc., 820 River Street, Inc., and their affiliates to investigate my background, references, and prior employment. I also authorize former employers and references to release any information they may have regarding my employment.

If hired, I agree to comply with the organization's policies and procedures, and I understand that my employment is "at-will," meaning either party can terminate the relationship at any time, with or without cause.



•	Applicant's Signature:	
	Date:	