

Youth LEAP Application

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

Please return completed applications by **MAY 26th** to
 Or send via email to:
lduvall@hudsonriverhousing.org

Hudson River Housing
 Attn: Lindsay Duvall
 313 Mill Street
 Poughkeepsie, NY 12601

(PLEASE PRINT)

Position(s) Applied For Youth LEAP Employee	Date of Application
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Last Name	First Name	Middle Name
Address	Street	City
		State
Zip Code		
Email Address		
Date of Birth:		Age:

Do you have a home telephone or a cell phone number? Yes No
 If Yes, give number(s) Cell _____
 House _____

Do you have a driver's license? Yes No

Do you have access to a vehicle? Yes No

Are you currently employed? Yes No

May we contact the people that you list on page 2 of this application for a reference? Yes No

Have you ever been convicted of a felony? Yes No
Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain

Education

	High School	Undergraduate College/University
School Name and Location		
Years Completed		
Describe Course of Study		
Extracurricular activities/ Sports		

References (Professional and/or personal)

Give name, address, telephone number, and relationship of two non-relative references.

1. _____

2. _____

Employment/Volunteer Experience *if applicable*

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, handicap or other protected status.

1. Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone	Hourly Rate/Salary		
	Starting	Final	
Job Title: Supervisor:			
Reason for leaving			
2. Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone	Hourly Rate/Salary		
	Starting	Final	
Job Title: Supervisor:			
Reason for leaving			

Special Skills and Qualifications

Summarize special skills and qualifications.

Statement of Interest

Please fill out a paragraph detailing your interest in the Youth LEAP program:

Applicant's Statement

I hereby affirm that the information provided on this Application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that any falsified information or significant omissions may disqualify me from further consideration for an internship or volunteer work and may be considered justification for dismissal if discovered at a later date.

I authorize a thorough investigation of my past employment and activities, agree to cooperate in such investigation and release from all liability or responsibility all persons and corporations requesting or supplying such information.

Signature

Date