

NAME: \_\_\_\_\_  
                                 Last                                First                                Mid Init.

ADDRESS: \_\_\_\_\_  
                                 Street

\_\_\_\_\_

City  State  Zip

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

If under 18, can you provide a worker's permit?                                  Yes        No

Do you have a driver's license?                                  Yes        No  
 (Answer only if applicable to job duties)

Are you legally able to accept employment in the United States?                                  Yes        No

Have you been convicted of a felony in the last seven years?                                  Yes        No

If yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**WHERE ARE YOU APPLYING FOR WORK? (CHECK BOX)**

- Belleayre Mountain
- Gore Mountain
- Whiteface Mountain
- Olympic Center
- Olympic Jumping Complex
- Olympic Sports Complex
- ORDA Store
- Administration

Position you are applying for:  
 \_\_\_\_\_  
 \_\_\_\_\_

How soon are you available?

**ONLY ANSWER THIS QUESTION IF YOU HAVE BEEN INFORMED OF THE JOB REQUIREMENTS:**

Are you able to perform, in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied?                                  Yes        No

**ONLY ANSWER THIS QUESTION IF YOU HAVE BEEN INFORMED OF THE JOB REQUIREMENTS:**  
 Are you able to perform, in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied?                                  Yes        No

**EMPLOYMENT HISTORY**

Start with your most recent job. Please include military assignments and volunteer work.

**#1. WORKED FROM** \_\_\_\_\_ **TO** \_\_\_\_\_                                  **EMPLOYER:** \_\_\_\_\_  
**TITLE AND DUTIES:** \_\_\_\_\_                                  **REASON FOR LEAVING:** \_\_\_\_\_

\_\_\_\_\_

**#2. WORKED FROM** \_\_\_\_\_ **TO** \_\_\_\_\_                                  **EMPLOYER:** \_\_\_\_\_  
**TITLE AND DUTIES:** \_\_\_\_\_                                  **REASON FOR LEAVING:** \_\_\_\_\_

\_\_\_\_\_

**#3. WORKED FROM** \_\_\_\_\_ **TO** \_\_\_\_\_                                  **EMPLOYER:** \_\_\_\_\_  
**TITLE AND DUTIES:** \_\_\_\_\_                                  **REASON FOR LEAVING:** \_\_\_\_\_

\_\_\_\_\_

**#4. WORKED FROM** \_\_\_\_\_ **TO** \_\_\_\_\_                                  **EMPLOYER:** \_\_\_\_\_  
**TITLE AND DUTIES:** \_\_\_\_\_                                  **REASON FOR LEAVING:** \_\_\_\_\_

\_\_\_\_\_

**EDUCATION**

NAME OF ELEMENTARY SCHOOL: \_\_\_\_\_ YEARS COMPLETED (THROUGH 8<sup>TH</sup> GRADE): \_\_\_\_\_

NAME OF HIGH SCHOOL: \_\_\_\_\_ YEARS COMPLETED (THROUGH 12<sup>TH</sup> GRADE): \_\_\_\_\_

NAME OF COLLEGE(s) (if applicable): \_\_\_\_\_ DEGREE(s): \_\_\_\_\_

DESCRIBE ANY SPECIALIZED TRAINING OR SPECIAL RECOGNITION YOU HAVE RECEIVED:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PERSONAL REFERENCES (do not use relatives nor former employers):**

NAME ADDRESS PHONE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NAME ADDRESS PHONE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NAME ADDRESS PHONE

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\_\_\_\_\_  
\_\_\_\_\_

NAME ADDRESS PHONE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE PROVIDE ANY ADDITIONAL INFORMATION YOU'D LIKE US TO CONSIDER WITH YOUR APPLICATION.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that the information provided herein is true and accurate to the best of my knowledge. I further authorize investigation of all information provided herein for employment as may be necessary in arriving at an employment decision. This includes contacting references and past employers. In the event of employment, I understand that false or misleading information provided in this application may result in discharge.

\_\_\_\_\_

Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_

Date

*Pursuant to Executive Order 161, no State entity, as defined by the Executive Order, is permitted to ask, or mandate, in any form, that an applicant for employment provide his or her current compensation, or any prior compensation history, until such time as the applicant is extended a conditional offer of employment with compensation. If such information has been requested from you before such time, please contact the Governor's Office of Employee Relations at (518) 474-6988 or via email at [info@goer.ny.gov](mailto:info@goer.ny.gov).*

**ORDA is an Affirmative Action / Equal Opportunity Employer**