

Have you been convicted of any crime in the past ten years that would preclude you from performing certain kinds of work? Yes No If yes, describe:

EDUCATION: Please list schools attended and year graduated or last date attended.

Describe other training, education, or subjects of special study or research.

EMPLOYMENT RECORD

DATES FROM/TO	NAME & ADDRESS OF EMPLOYER	SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING

Describe in detail the work performed.

DATES FROM/TO	NAME & ADDRESS OF EMPLOYER	SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING

Describe in detail the work performed.

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Describe in detail the work performed.

DATES FROM/TO	NAME & ADDRESS OF EMPLOYER	SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING

Describe in detail the work performed.

Describe any volunteer work that would be applicable to your training.

REFERENCES: Please list below the names of three persons not related to you, whom you

have known at least one year. May we contact these people?

Name	Address	City, State	Zip	Years Acquainted
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General

List licensures and/or certificates along with their numbers.

Are they current? _____

Is there any other information you feel we should consider with your application?

Which, if any, of the following areas are of special interest to you?

- | | |
|--------------------------|-------------------------------|
| _____ Detoxification | _____ Public Relations |
| _____ Intake | _____ Administration |
| _____ Assessment | _____ Halfway House |
| _____ Primary Counseling | _____ Special Interest Groups |
| _____ Family Therapy | _____ Adolescent |
| _____ Aftercare | |

Other areas of interest: