		SUN	МО	N	TUES	WED		THU	JR	FRI	SAT	
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amples:	Coaches, Te	eachers, Past	Supervisor	s, Career C	Rounselors, Churc	Reference characteristics (Control of Control of Contro	es					
Name of Person:				Phone #		Busines	SS		Re	Relationship to you		
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Name of Person:				Phone #		Busines	SS		Re	Relationship to you		
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1 L 01	Worke	(I.E.: 0	HILDCARE, F	ETAIL, FAST F	OOD, etc.		DLLIV	00111	IOILL	OI MILLON	`' ·	
					E	ducation				Dograo	Subjects /	
School		Name & Address			Last Yea	Last Year Completed (circ			Degree Received	Subjects / Major		
										If you are directed	If in high colors	
High School/ GED School						1	2	3 4	4	If not graduated yet, write Still	If in high school write General	
										Attending or Graduated (Month/Year)	<u>Education</u>	
										(MOHIII/ Fear)		
College						1	2	3	4			
								_				
					Addition	al Inform	natio	n:				
	• •	,	_	_	•				•	h that we se	rve. Please	
e follo	owing qu	estions a	s best a	as you c	an. <u>All info</u>	rmation wi	II be k	ept c	onfide	ential.		
1. /	re you part of the lunch program at school?						□ Yes			□ No		
2. [Did you ever drop out of high school?							□ Ye	6	□ No		
3. Do you have a current Individual Educational Plan (IEP) a						EP) at school	?	□ Yes			□ No	
4. <i>A</i>	Are you currently in the Independent Living Program (ILP					(ILP)		□ Ye	6		□ No	
5. [o or did you have foster parents?							□ Yes □ No				
6. [o you have any kids of your own?							□ Yes □ No				
7. H	Have you ever stayed in emergency housing?							□ Yes □ No				
8. H	8. Have you ever been on probation?							□ Yes □ No				
	Please spe	ecify your e	thnicity:	□ Americ	an Indian or	Alaska Nativ	e 1	⊐ Asiar	1	□ Black or Afr	rican Americar	
9. F	•											
	•	awaiian or	Other Pa	icific Islan	der	□ White	/Cauca	ısian		Hispanic or La	tino	

Date _____

Signature _____