**Peer Outreach Worker Application**

**Application Deadline Friday 9-23-16 by 6pm**

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| --- | --- | --- | --- | --- |
| **Date:** | | | | |
| **Name:** | | | | |
| **Address:**  **City, State, Zip:** | | | | |
| **Phone number:**  **Another number you can be reached at:**  **Email address:** | | | | |
| **Date of Birth:** | | | | |
| **How did you hear about Ozone House?** | | | | |
| **Why are you interested in this position?** | | | | |
| **Past leadership/ work/ volunteer experience:**  **Company:**  **Duties:**  **Dates of employment/ service:**  **Past leadership/ work/ volunteer experience: (continued)**  **Company:**  **Duties:**  **Dates of employment/ service:** | | | | |
| **Current educational/ training program:**  **When will you graduate:** | | | | |
| **Please list your hours of availability:** | | | | |
| **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
|  |  |  |  |  |
| **Please list 2 references (adults who are not related to you).**  **Name: Name:**  **Relationship: Relationship:**  **Phone #: Phone #:** | | | | |
| **Is there anything else you want us to know about you?** | | | | |