**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?** |