

III. Education/Training:

	Name and location of schools	Years Attended	Date Graduated	Major(s)
High School				
College(s)				
Other				

Do you speak a foreign language fluently? Yes No
 Can you read/write any foreign language(s)? Yes No
 Do you possess skills in manual communication with deaf and hearing impaired? Yes No

IV. Employment:

List below your last four employers, with your current one first:

Date Month & Year	Employer	Supervisor	Wage Rate/ Salary	Position & Hours per week	Reason for Leaving
From:		Name			
To:		Phone #			
From:		Name			
To:		Phone #			
From:		Name			
To:		Phone #			
From:		Name			
To:		Phone #			

Other relevant experience (e.g.: volunteer work): _____

Physical Condition: Describe any physical/emotional or other limitations that would limit or interfere with your work performance: _____

Career Goals: Please describe: _____

Reason interested in East House and field of mental health/chemical dependency rehabilitation:

I authorize investigation of all statements contained in this application, including information on my character, reputation, work habits, performance, drivers record, criminal history and verification of information provided on this employment application and interview. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time and without previous notice.

Date _____	Signature _____
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