**HOUSE PARENT APPLICATION FORM**

2019 Educational Programming

(We will require this form, 2 reference letters, as well as a recent Criminals Record Check completed before returned)

|  |  |
| --- | --- |
| Name |  |
| Gender |  |
| Age |  |
| Occupation |  |
| Child’s Name |  |
| Number of years’ experience with children |  |
| Have you been a house parent with us before? |  |
| If so, when? |  |
| Address |  |
| Phone |  |
| Email |  |
| Do you have any valid specialized training? i.e. First Aid, CPR, etc. |  |
| Have you had a Criminal Record Check completed and attached? |  |
| During which session are you interested in serving as a house parent? |  |

Please tell us your reasoning for wanting to be a house parent. Include any other notes for consideration.