

RESIDENT PROGRAM APPLICATION



150 Osmun, Pontiac
Dream Centers of Michigan

PERSONAL INFORMATION

name:

birthdate:

phone number:

email:

driver's license number or state ID number

social security number

explain current living situation:

background information about your family:

explain your childhood experience:

do you have a criminal record? if so, please give the detail of those experiences:

EDUCATION INFORMATION

ELEMENTARY SCHOOL(S) ATTENDED:

name: location:

name: location:

name: location:

MIDDLE SCHOOL(S) ATTENDED:

name: location:

name: location:

name: location:

HIGH SCHOOL(S) ATTENDED:

name: location:

name: location:

name: location:

did you graduate from high school? yes no

if yes, what high school? year

COLLEGE ATTENDED:

name: location:

how many semesters did you complete?

what was your program of study?

EMPLOYMENT INFORMATION

company: address:

dates of employment: from: to:

supervisor's name: responsibilities:

company: address:

dates of employment: from: to:

supervisor's name: responsibilities:

what are your goals and dreams?

3 CHARACTER REFERENCES

name:

phone:

relationship to this reference:

years known:

name:

phone:

relationship to this reference:

years known:

name:

phone:

relationship to this reference:

years known:
